

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---|---|------------------|
| FAMILY PRACTICE | | | |
| AL-TAI (VCMC),ZEENA | 1227 E LOS ANGELES AVE SIMI VALLEY CA 93065 | 254 W HARVARD BLVD STE B SANTA PAULA CA 93060-3920 | |
| Availability: OPEN | Phone: (805) 582-4000 | (805) 229-0200 | |
| Board Certified: YES | Fax: (805) 579-6082 | (805) 921-1766 | |
| Language(s): ARABIC | | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | | | |
| ANANTH (VCMC),MINA | 1334 E MAIN ST SANTA PAULA CA 93060-2926 | | |
| Availability: OPEN | Phone: (805) 933-1122 | | |
| Board Certified: 1208106 | Fax: (805) 933-0522 | | |
| Language(s): SPANISH | | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SANTA PAULA MEDICAL CLINIC | | | |
| ANDRADE (VCMC),ALEJANDRO | 2220 E GONZALES RD STE 120A-B OXNARD CA 93036-8210 | | |
| Availability: OPEN | Phone: (805) 981-5151 | | |
| Board Certified: 995079 | Fax: (805) 981-5150 | | |
| Language(s): SPANISH | | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: MAGNOLIA WEST | | | |
| ARAUJO (VCMC),DAVID | 300 HILLMONT AVE BLDG 340 #201 VENTURA CA 93003-3099 | | |
| Availability: OPEN TO EXISTING | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|-------------------|------------------|
| Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | Phone: (805) 652-6100 Fax: (805) 652-3252 | | |
| ARNDT,PRESTON W | 411 W OJAI AVE STE B | | |
| Availability: OPEN Board Certified: YES Language(s): GERMAN Gender Affirming Care: No Group Affiliation: | OJAI CA 93023 Phone: (559) 335-8408 Fax: (805) 273-0216 | | |
| BALDWIN (VCMC),NELL | 2220 E GONZALES RD STE 120A-B | | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: MAGNOLIA FAMILY MEDICAL CLINIC WEST | OXNARD CA 93036-3707 Phone: (805) 981-5151 Fax: (805) 981-5150 | | |
| BALLOCH,JODY | 5051 VERDUGO WAY STE 110 | | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No | CAMARILLO CA 93012-8680 Phone: (805) 384-8071 Fax: (805) 482-2482 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--------------------------|-------------------|------------------|
| Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |
| BLAZE (VCMC),ALLISON | 2400 S C ST | | |
| Availability: OPEN | OXNARD CA 93033-0000 | | |
| Board Certified: YES | Phone: (805) 240-7000 | | |
| Language(s): SPANISH | Fax: (805) 486-0396 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: LAS ISLAS WOMEN'S HEALTH CLINIC | | | |
| BRECKENRIDGE (VCMC),AMELIA J | 828 W VENTURA ST STE 100 | | |
| Availability: OPEN TO EXISTING | FILLMORE CA 93015-1876 | | |
| Board Certified: YES | Phone: (805) 524-2000 | | |
| Language(s): | Fax: (805) 524-9601 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: FILLMORE FAMILY MEDICAL GROUP | | | |
| BUNDY,LOGAN | 533 SESPE AVE STE B | | |
| Availability: OPEN | FILLMORE CA 93015-1942 | | |
| Board Certified: NO | Phone: (805) 524-6700 | | |
| Language(s): SPANISH | Fax: (805) 524-6707 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|--|------------------|
| CARVALHO (VCMC),J PAULO Availability: OPEN TO EXISTING Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP | 125 W THOUSAND OAKS BLVD STE 300 THOUSAND OAKS CA 91360-4460 | Phone: (805) 418-9100 Fax: (805) 370-0619 | |
| CERVANTES (VCMC),MIGUEL Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP NORTH | 2400 S C ST OXNARD CA 93033-4555 | Phone: (805) 240-7000 Fax: (805) 486-0396 | |
| CHAMBERS (VCMC),DARIN T Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP | 325 W CHANNEL ISLANDS BLVD OXNARD CA 93033-4501 | Phone: (805) 204-9500 Fax: (805) 240-2128 | |
| CHAWLA (VCMC),ANIL | 1227 E LOS ANGELES AVE | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---------------------------|--|------------------|
| Availability: OPEN Board Certified: YES Language(s): GUJARATI Gender Affirming Care: No Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | SIMI VALLEY CA 93065-2871 | Phone: (805) 582-4000 Fax: (805) 579-6082 | |
| CHENG (VCMC),ANDREW | 2400 S C ST | | |
| Availability: OPEN Board Certified: 1016555 Language(s): MANDARIN Gender Affirming Care: No Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP | OXNARD CA 93033-4555 | Phone: (805) 240-7000 Fax: (805) 486-0396 | |
| CHOUDHARY (VCMC),SUNEETA | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN Board Certified: 909192 Language(s): HINDI Gender Affirming Care: No Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | SIMI VALLEY CA 93065-2871 | Phone: (805) 582-4000 Fax: (805) 579-6082 | |
| CLARK (VCMC),MARGARET | 2400 SOUTH C STREET | | |
| Availability: OPEN Board Certified: YES Language(s): | OXNARD CA 93033-4501 | Phone: (805) 204-7000 Fax: (805) 486-0396 | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|-----------------------------------|-------------------|------------------|
| Gender Affirming Care: No Group Affiliation: LAS ISLAS WOMEN'S HEALTH CLINIC | | | |
| CUSICK (VCMC), WILLIAM M | 133 W SANTA CLARA ST | | |
| Availability: OPEN | VENTURA CA 93001-2543 | | |
| Board Certified: YES | Phone: (805) 641-5600 | | |
| Language(s): SPANISH | Fax: (805) 641-5677 | | |
| Gender Affirming Care: No Group Affiliation: WEST VENTURA MEDICAL CLINIC | | | |
| DAVID (VCMC), JACOB | 300 HILLMONT AVE BLDG 340 #201 | | |
| Availability: OPEN | VENTURA CA 93003-3099 | | |
| Board Certified: YES | Phone: (805) 652-6100 | | |
| Language(s): SPANISH | Fax: (805) 652-3252 | | |
| Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |
| DEGUZMAN (VCMC), DOROTHY | 300 HILLMONT AVE BLDG 340 STE 201 | | |
| Availability: OPEN | VENTURA CA 93003-1651 | | |
| Board Certified: YES | Phone: (805) 652-6100 | | |
| Language(s): | Fax: (805) 652-3252 | | |
| Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|---|------------------|
| DICKEY, MARIA I Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 3901 LAS POSAS RD STE 10 CAMARILLO CA 93010-1501 Phone: (805) 918-4476 Fax: (805) 918-4478 | | |
| DICKEY, MICAH Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 2901 N VENTURA RD STE 100 OXNARD CA 93036 Phone: (805) 485-7877 Fax: (805) 981-4472 | 243 MARCH ST SANTA PAULA CA 93060-2511 (805) 525-7131 (805) 525-0041 | |
| DICKSTEIN (VCMC), SHERYL Availability: OPEN TO EXISTING Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | 300 HILLMONT AVE BLDG 340 #201 VENTURA CA 93003-3099 Phone: (805) 652-6100 Fax: (805) 652-3252 | | |
| DODGE, ROBERT | 168 N BRENT ST STE 502 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|-------------------|------------------|
| Availability: OPEN Board Certified: 290157 Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | VENTURA CA 93003-2840 Phone: (805) 641-2000 Fax: (805) 653-1644 | | |
| DORNER (VCMC),GILLIAN | 2400 S C ST | | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: LAS ISLAS WOMEN'S HEALTH CLINIC | OXNARD CA 93033-4555 Phone: (805) 240-7000 Fax: (805) 486-0396 | | |
| FATEMI,SHAHRAM | 1700 N ROSE AVE STE 210 | | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | OXNARD CA 93030-7639 Phone: (805) 384-8071 Fax: (805) 482-2482 | | |
| FLOM (VCMC),SHEILA | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN Board Certified: YES | SIMI VALLEY CA 93065-2871 Phone: (805) 582-4000 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|--------------------------------------|------------------|
| Language(s): SPANISH Gender Affirming Care: No Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | Fax: (805) 579-6082 | | |
| FOUAD,HANY | 5051 VERDUGO WAY STE 110 CAMARILLO CA 93012-8680 | | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | Phone: (805) 384-8071 Fax: (805) 482-2482 | | |
| FRANCKE (VCMC),WENDY | 133 W SANTA CLARA ST VENTURA CA 93001-2543 | 300 HILLMONT AVE BLDG 340 STE 201 | VENTURA CA 93003 |
| Availability: OPEN TO EXISTING Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: WEST VENTURA MEDICAL CLINIC | Phone: (805) 641-5600 Fax: (805) 641-5677 | (805) 652-6100 (805) 652-3252 | |
| GAMBLE (VCMC),MICAH | 300 HILLMONT AVE BLDG 340 STE 201 | | |
| Availability: OPEN Board Certified: Language(s): | Phone: (805) 652-6100 Fax: (805) 652-3252 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|-------------------------------|-------------------|------------------|
| Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |
| GARCIA-PENA (VCMC),HAMLET R | 2220 E GONZALES RD STE 120A-B | | |
| Availability: OPEN | OXNARD CA 93036-3707 | | |
| Board Certified: YES | Phone: (805) 981-5151 | | |
| Language(s): SPANISH | Fax: (805) 981-5150 | | |
| Gender Affirming Care: No Group Affiliation: MAGNOLIA WEST | | | |
| GAREYS (VCMC),LYUDMYLA | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN | SIMI VALLEY CA 93065-2871 | | |
| Board Certified: YES | Phone: (805) 582-4000 | | |
| Language(s): RUSSIAN | Fax: (805) 579-6082 | | |
| Gender Affirming Care: No Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | | | |
| GOMEZ (VCMC),RAMON | 1334 E MAIN ST | | |
| Availability: OPEN | SANTA PAULA CA 93060 | | |
| Board Certified: YES | Phone: (805) 933-1122 | | |
| Language(s): SPANISH | Fax: (805) 933-0522 | | |
| Gender Affirming Care: No Group Affiliation: SANTA PAULA MEDICAL CLINIC | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|--|------------------|
| GROSSMAN (VCMC),SAMUEL Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: WEST VENTURA MEDICAL CLINIC (FQHC) | 133 W SANTA CLARA ST VENTURA CA 93001 | Phone: (805) 641-5600 Fax: (805) 641-5677 | |
| HELMER (VCMC) JR,JAMES Availability: OPEN TO EXISTING Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | 300 HILLMONT AVE BLDG 340 #201 VENTURA CA 93003-3099 | Phone: (805) 652-6100 Fax: (805) 652-3252 | |
| HOFER,CHRISTINA M Availability: OPEN Board Certified: 908963 Language(s): SPANISH Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 243 MARCH ST SANTA PAULA CA 93060 | Phone: (805) 525-7131 Fax: (805) 525-0041 | |
| JENDUSA (VCMC),MICHAEL F Availability: OPEN | 2220 E GONZALES RD STE 120A-B OXNARD CA 93033 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---|--|------------------|
| Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: MAGNOLIA WEST | Phone: (805) 981-5151 Fax: (805) 981-5160 | | |
| JONES (VCMC),AMY | 612 SPRING RD BLDG A | | |
| Availability: OPEN Board Certified: 847909 Language(s): Gender Affirming Care: No Group Affiliation: MOORPARK FAMILY MEDICAL CLINIC | MOORPARK CA 93021-1820 Phone: (805) 523-5400 Fax: (805) 523-2233 | | |
| JONOKUCHI,CARL | 3901 LAS POSAS RD STE 10 | 550 ST CHARELS DR STE 200 | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP – VENTURA | CAMARILLO CA 93010-1502 Phone: (805) 918-4476 Fax: (805) 918-4478 | THOUSAND OAKS CA 91360 (805) 384-8071 (805) 497-3838 | |
| KANG (VCMC),SEONG M | 125 W THOUSAND OAKS BLVD STE 300 | 3801 LAS POSAS RD STE 214 | |
| Availability: OPEN TO EXISTING Board Certified: YES Language(s): KOREAN Gender Affirming Care: No | THOUSAND OAKS CA 91360-4460 Phone: (805) 418-9100 Fax: (805) 370-0619 | CAMARILLO CA 93010 (805) 437-0900 (805) 987-2878 | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|--------------------------------|-------------------|------------------|
| Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP | | | |
| KARRA (VCMC),ANNAPURNA | 612 SPRING RD BLDG A | | |
| Availability: OPEN | MOORPARK CA 93021-1298 | | |
| Board Certified: YES | Phone: (805) 523-5400 | | |
| Language(s): SPANISH | Fax: (805) 523-2233 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: MOORPARK FAMILY MEDICAL CLINIC | | | |
| KHAN (VCMC),TIPU V | 300 HILLMONT AVE BLDG 340 #201 | | |
| Availability: OPEN | VENTURA CA 93003-3099 | | |
| Board Certified: 971621 | Phone: (805) 652-6100 | | |
| Language(s): SPANISH | Fax: (805) 652-3252 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |
| KONDAL (VCMC),UDIT | 3801 LAS POSAS RD STE 214 | | |
| Availability: OPEN | CAMARILLO CA 93010-1426 | | |
| Board Certified: YES | Phone: (805) 437-0900 | | |
| Language(s): SPANISH | Fax: (805) 987-2878 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: LAS POSAS FAMILY MEDICAL GROUP | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|--|------------------|
| KROENING (VCMC),EMILY Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP | 125 W THOUSAND OAKS BLVD STE 300 THOUSAND OAKS CA 91360-4460 | Phone: (805) 418-9100 Fax: (805) 370-0619 | |
| KUBO,KOJI Availability: OPEN Board Certified: YES Language(s): JAPANESE Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 1700 N ROSE AVE STE 210 OXNARD CA 93030-3790 | Phone: (805) 384-8071 Fax: (805) 482-2482 | |
| LAMBING (VCMC),CHERYL Availability: OPEN TO EXISTING Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | 300 HILLMONT AVE BLDG 340 #201 VENTURA CA 93003-3099 | Phone: (805) 652-6100 Fax: (805) 652-3252 | |
| LEVIN (VCMC),ANA A | 254 W HARVARD BLVD STE B | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---------------------------|--|------------------|
| Availability: OPEN Board Certified: 1213854 Language(s): SPANISH Gender Affirming Care: No Group Affiliation: SANTA PAULA WEST | SANTA PAULA CA 93060 | Phone: (805) 229-0200 Fax: (805) 921-1766 | |
| LU (VCMC),NANCY | 1334 E MAIN ST | | |
| Availability: OPEN Board Certified: YES Language(s): MANDAR Gender Affirming Care: No Group Affiliation: SANTA PAULA MEDICAL CLINIC | SANTA PAULA CA 93060 | Phone: (805) 933-1122 Fax: (805) 933-0522 | |
| LYNE,ALAN W | 245 N TENTH ST | | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: | SANTA PAULA CA 93060-2804 | Phone: (805) 525-7515 Fax: (805) 933-1612 | |
| MESHRIKY (VCMC),JOSEPH | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN Board Certified: 932681 Language(s): ARABIC Gender Affirming Care: No | SIMI VALLEY CA 93065-2871 | Phone: (805) 582-4000 Fax: (805) 579-6082 | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---------------------------|-------------------|------------------|
| Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | | | |
| MILLER (VCMC),JEFFREY | 3801 LAS POSAS RD STE 214 | | |
| Availability: OPEN | CAMARILLO CA 93010-1426 | | |
| Board Certified: YES | Phone: (805) 437-0900 | | |
| Language(s): SPANISH | Fax: (805) 987-2878 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: LAS POSAS FAMILY MEDICAL GROUP | | | |
| MOFFATT,ROBERT | 231 N DOS CAMINOS AVE | | |
| Availability: OPEN | VENTURA CA 93003-1660 | | |
| Board Certified: 347044 | Phone: (805) 653-5070 | | |
| Language(s): | Fax: (805) 653-8099 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: | | | |
| MUELLER (VCMC),KHRISTINA M | 612 SPRING RD BLDG A | | |
| Availability: OPEN | MOORPARK CA 93021-1820 | | |
| Board Certified: YES | Phone: (805) 523-5400 | | |
| Language(s): SPANISH | Fax: (805) 523-2233 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: MOORPARK FAMILY MEDICAL CLINIC | | | |
| MURPHY,CHARLES | 168 N BRENT ST STE 502 | | |
| Availability: OPEN | VENTURA CA 93003-2840 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|--|-------------------|------------------|
| Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP – VENTURA | Phone: (805) 641-2000 Fax: (805) 653-1644 | | |
| O'BRYAN-BECERRA (VCMC),CARLOS | 300 HILLMONT AVE BLDG 340 STE 201 | | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICAL CENTER | VENTURA CA 93003 Phone: (805) 652-6100 Fax: (805) 652-3252 | | |
| PAKALA (VCMC),SHILPA | 2220 E GONZALES RD STE 120A-B | | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: MAGNOLIA WEST | OXNARD CA 93036-1807 Phone: (805) 981-5151 Fax: (805) 981-5150 | | |
| PAPADOR,JOSEPH | 2901 N VENTURA RD STE 100 | | |
| Availability: OPEN Board Certified: 1356160 Language(s): Gender Affirming Care: No | OXNARD CA 93036-1126 Phone: (805) 981-6101 Fax: (805) 981-6201 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|-------------------------------------|-------------------|------------------|
| Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |
| PATRICK (VCMC),LEAH R | 125 W THOUSAND OAKS BLVD STE 300 | | |
| Availability: OPEN TO EXISTING | THOUSAND OAKS CA 91360-4460 | | |
| Board Certified: YES | Phone: (805) 418-9100 | | |
| Language(s): | Fax: (805) 370-0619 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP | | | |
| PATTERSON (VCMC),STANLEY | 2220 E GONZALES RD STE 120A-B | | |
| Availability: OPEN TO EXISTING | OXNARD CA 93036-8210 | | |
| Board Certified: YES | Phone: (805) 981-5151 | | |
| Language(s): SPANISH | Fax: (805) 981-5150 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: MAGNOLIA WEST | | | |
| PERERA (VCMC),YOHAN R | 2400 S C ST | | |
| Availability: OPEN | OXNARD CA 93033 | | |
| Board Certified: YES | Phone: (805) 240-7000 | | |
| Language(s): | Fax: (805) 486-0396 | | |
| Gender Affirming Care: No | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|-----------------------|----------------------------|------------------|
| Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP NORTH | | | |
| PHANG (VCMC),SAMUEL K | 2400 S C ST | | |
| Availability: OPEN | OXNARD CA 93033-0000 | | |
| Board Certified: YES | Phone: (805) 240-7000 | | |
| Language(s): MANDARIN | Fax: (805) 486-0396 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP NORTH | | | |
| RAMIREZ (VCMC),CARMEN | 2400 SOUTH C ST | 325 W CHANNEL ISLANDS BLVD | |
| Availability: OPEN | OXNARD CA 93033-4555 | OXNARD CA 93033-4501 | |
| Board Certified: YES | Phone: (805) 240-7000 | (805) 204-9500 | |
| Language(s): | Fax: (805) 486-0396 | (805) 240-2128 | |
| Gender Affirming Care: No | | | |
| Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP NORTH | | | |
| SENDAYDIEGO (VCMC),CATHERINE A | 2400 SOUTH C ST | | |
| Availability: OPEN | OXNARD CA 93033-4555 | | |
| Board Certified: YES | Phone: (805) 240-7000 | | |
| Language(s): | Fax: (805) 486-0396 | | |
| Gender Affirming Care: No | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|-------------------------------|-------------------|------------------|
| Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP NORTH | | | |
| SERRANO (VCMC),VLADIMIR A | 2220 E GONZALES RD STE 120A-B | | |
| Availability: OPEN | OXNARD CA 93036-3707 | | |
| Board Certified: YES | Phone: (805) 981-5151 | | |
| Language(s): SPANISH | Fax: (805) 981-5325 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: MAGNOLIA WEST | | | |
| SOLINAS (VCMC),LISA | 845 N TENTH ST STE 3 | | |
| Availability: OPEN | SANTA PAULA CA 93060 | | |
| Board Certified: 283302 | Phone: (805) 525-0215 | | |
| Language(s): SPANISH | Fax: (805) 525-8031 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SANTA PAULA HOSPITAL CLINIC (FQHC) | | | |
| SPORTELLI (VCMC),MARISA | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN | SIMI VALLEY CA 93065-2871 | | |
| Board Certified: 639424 | Phone: (805) 582-4000 | | |
| Language(s): SPANISH | Fax: (805) 579-6082 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|-------------------|------------------|
| STEPHENS,KYLE Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 168 N BRENT ST STE 502 VENTURA CA 93003-2840 Phone: (805) 641-2000 Fax: (805) 653-1644 | | |
| SUJANANI,SUNITA Availability: OPEN Board Certified: 778643 Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 2601 E MAIN ST STE 100 VENTURA CA 93003-2801 Phone: (805) 585-5562 Fax: (805) 585-5689 | | |
| TUSHLA,MICHAEL Availability: OPEN Board Certified: 516917 Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 400 E SANTA BARBARA ST STE A SANTA PAULA CA 93060 Phone: (805) 525-2121 Fax: (805) 525-3652 | | |
| WEDLOW,CAMILLE | 550 ST CHARLES DR STE 200 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|-------------------------------|--|------------------|
| Availability: OPEN Board Certified: 720212 Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | THOUSAND OAKS CA 91360 | Phone: (805) 384-8071 Fax: (805) 497-3838 | |
| WHIPPLE (VCMC),CASEY | 2220 E GONZALES RD STE 120A-B | | |
| Availability: OPEN Board Certified: 1243715 Language(s): Gender Affirming Care: No Group Affiliation: MAGNOLIA WEST | OXNARD CA 93036-3707 | Phone: (805) 981-5151 Fax: (805) 981-5150 | |
| WIKHOLM,GARY D | 247 W HARVARD BLVD | | |
| Availability: OPEN Board Certified: 161915 Language(s): SPANISH Gender Affirming Care: No Group Affiliation: VALLEY MEDICAL GROUP | SANTA PAULA CA 93060-3223 | Phone: (805) 525-0907 Fax: (866) 402-8906 | |
| WILKEY,CLARK | 168 N BRENT ST STE 502 | | |
| Availability: OPEN Board Certified: YES Language(s): | VENTURA CA 93003 | Phone: (805) 641-2000 Fax: (805) 653-1644 | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--------------------------------|-----------------------------------|------------------|
| Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |
| WISNIEWSKI(VCMC),DANIELLE | 254 W HARVARD BLVD STE B | 300 HILLMONT AVE BLDG 340 STE 502 | |
| Availability: OPEN | SANTA PAULA CA 93060-3920 | VENTURA CA 93003 | |
| Board Certified: 1170754 | Phone: (805) 229-0200 | (805) 652-6524 | |
| Language(s): SPANISH | Fax: (805) 921-1766 | (805) 652-5983 | |
| Gender Affirming Care: No Group Affiliation: SANTA PAULA WEST | | | |
| ZWOLAK (VCMC),ZACHARY | 300 HILLMONT AVE BLDG 340 #201 | | |
| Availability: OPEN | VENTURA CA 93003-3099 | | |
| Board Certified: 999651 | Phone: (805) 652-6100 | | |
| Language(s): FRENCH | Fax: (805) 652-3252 | | |
| Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|------------------------------------|-----------------|-------------------|------------------|
|------------------------------------|-----------------|-------------------|------------------|

INTERNAL MEDICINE

BRANA,SABRINA

| | | | |
|--|-------------------------------------|---|--|
| Availability: OPEN | 64 E DAILY DR CAMARILLO CA 93010 | 5051 VERDUGO WAY STE 110 CAMARILLO CA 93012-8680 | |
| Board Certified: 1235079 | Phone: (805) 384-8071 | (805) 384-8071 | |
| Language(s): | Fax: (805) 437-8717 | (805) 484-3610 | |
| Gender Affirming Care: No | | | |
| Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |

CAFFREY,CYNTHIA

| | | | |
|--|---|--|--|
| Availability: OPEN | 243 MARCH ST SANTA PAULA CA 93060-2511 | | |
| Board Certified: 619685 | Phone: (805) 525-7131 | | |
| Language(s): | Fax: (805) 525-0041 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |

CAPPER,BENJAMIN

| | | | |
|--|---|--|--|
| Availability: OPEN | 3901 LAS POSAS RD STE 10 CAMARILLO CA 93010-1502 | | |
| Board Certified: 1175928 | Phone: (805) 918-4476 | | |
| Language(s): | Fax: (805) 918-4478 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|---|------------------|
| CHEN, JIAN ANNA Availability: OPEN Board Certified: 520024 Language(s): CHINESE Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 243 MARCH ST SANTA PAULA CA 93060-2511 Phone: (805) 525-7131 Fax: (805) 525-0041 | 3901 LAS POSAS RD STE 10 CAMARILLO CA 93010-1502 (805) 918-4476 (805) 918-4478 | |
| DARDEN (VCMC), TED D Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP | 125 W THOUSAND OAKS BLVD STE 300 THOUSAND OAKS CA 91360-4460 Phone: (805) 418-9100 Fax: (805) 370-0619 | | |
| DEKKERS, ROBERT J Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 243 MARCH ST SANTA PAULA CA 93060-2511 Phone: (805) 525-7131 Fax: (805) 525-0041 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|-------------------|------------------|
| DEUTSCH,GARY M Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 243 MARCH ST SANTA PAULA CA 93060-2511 Phone: (805) 525-7131 Fax: (805) 525-0041 | | |
| HOWARD (VCMC),DANA Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP | 125 W THOUSAND OAKS BLVD STE 300 THOUSAND OAKS CA 91360-4460 Phone: (805) 418-9100 Fax: (805) 370-0619 | | |
| JAMAL,NASER Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 5051 VERDUGO WAY STE 100 CAMARILLO CA 93012-8681 Phone: (805) 384-8071 Fax: (805) 482-2482 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|--|------------------|
| LYONS (VCMC),MORGAN E Availability: OPEN TO EXISTING Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: MAGNOLIA WEST | 2220 E GONZALES RD STE 120A-B OXNARD CA 93036-3707 Phone: (805) 981-5151 Fax: (805) 981-5150 | 2240 E GONZALES RD STE 100 OXNARD CA 93036-8212 (805) 981-5161 (805) 981-5160 | |
| MANDAL (VCMC),SMITA Availability: OPEN Board Certified: 951840 Language(s): GUJARATI Gender Affirming Care: No Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | 1227 E LOS ANGELES AVE SIMI VALLEY CA 93065-2871 Phone: (805) 582-4000 Fax: (805) 579-6082 | | |
| MARKS (VCMC),ERIC Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: LAS POSAS FAMILY MEDICAL GROUP | 3801 LAS POSAS RD STE 214 CAMARILLO CA 93010-1426 Phone: (805) 437-0900 Fax: (805) 987-2878 | | |
| MESCHER-COX,MEGAN Availability: OPEN Board Certified: YES Language(s): | 2901 N VENTURA RD SUITE 100 OXNARD CA 93030 Phone: (805) 485-7877 Fax: (805) 981-4472 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---------------------------|-------------------|------------------|
| Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |
| SKINNER, EDWINA | 5051 VERDUGO WAY STE. 100 | | |
| Availability: OPEN | CAMARILLO CA 93012-8680 | | |
| Board Certified: 883325 | Phone: (805) 384-8071 | | |
| Language(s): | Fax: (805) 482-2482 | | |
| Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |
| ULRICH, RAMSEY | 2601 E MAIN ST STE 100 | | |
| Availability: OPEN | VENTURA CA 93003-2801 | | |
| Board Certified: 580048 | Phone: (805) 585-5562 | | |
| Language(s): SPANISH | Fax: (805) 585-5689 | | |
| Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|------------------------------------|-----------------|-------------------|------------------|
|------------------------------------|-----------------|-------------------|------------------|

OBSTETRICS & GYNECOLOGY

BALDWIN (VCMC),NELL

Availability: OPEN

Board Certified: YES

Language(s):

Gender Affirming Care: No

Group Affiliation: MAGNOLIA FAMILY
MEDICAL CLINIC
WEST

2220 E GONZALES RD STE 120A-B

OXNARD CA 93036-3707

Phone: (805) 981-5151

Fax: (805) 981-5150

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---|---|------------------|
| OBSTETRICS-FAMILY PRACTITIONER | | | |
| AL-TAI (VCMC),ZEENA | 1227 E LOS ANGELES AVE SIMI VALLEY CA 93065 | 254 W HARVARD BLVD STE B SANTA PAULA CA 93060-3920 | |
| Availability: OPEN | Phone: (805) 582-4000 | (805) 229-0200 | |
| Board Certified: YES | Fax: (805) 579-6082 | (805) 921-1766 | |
| Language(s): ARABIC | | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | | | |
| ANDRADE (VCMC),ALEJANDRO | 2220 E GONZALES RD STE 120A-B OXNARD CA 93036-8210 | | |
| Availability: OPEN | Phone: (805) 981-5151 | | |
| Board Certified: 995079 | Fax: (805) 981-5150 | | |
| Language(s): SPANISH | | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: MAGNOLIA WEST | | | |
| ARAUJO (VCMC),DAVID | 300 HILLMONT AVE BLDG 340 #201 VENTURA CA 93003-3099 | | |
| Availability: OPEN TO EXISTING | Phone: (805) 652-6100 | | |
| Board Certified: YES | Fax: (805) 652-3252 | | |
| Language(s): | | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |
| BLAZE (VCMC),ALLISON | 2400 S C ST OXNARD CA 93033-0000 | | |
| Availability: OPEN | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|------------------------------------|-----------------|-------------------|------------------|
|------------------------------------|-----------------|-------------------|------------------|

Board Certified: YES Phone: (805) 240-7000
 Language(s): SPANISH Fax: (805) 486-0396
 Gender Affirming Care: No
 Group Affiliation: LAS ISLAS WOMEN'S
 HEALTH CLINIC

CARVALHO (VCMC),J PAULO 125 W THOUSAND OAKS BLVD STE
 300
 Availability: OPEN TO EXISTING THOUSAND OAKS CA 91360-4460
 Board Certified: YES Phone: (805) 418-9100
 Language(s): SPANISH Fax: (805) 370-0619
 Gender Affirming Care: No
 Group Affiliation: CONEJO VALLEY
 FAMILY MEDICAL
 GROUP

CERVANTES (VCMC),MIGUEL 2400 S C ST
 Availability: OPEN OXNARD CA 93033-4555
 Board Certified: YES Phone: (805) 240-7000
 Language(s): SPANISH Fax: (805) 486-0396
 Gender Affirming Care: No
 Group Affiliation: LAS ISLAS FAMILY
 MEDICAL GROUP
 NORTH

CHAMBERS (VCMC),DARIN T 325 W CHANNEL ISLANDS BLVD
 Availability: OPEN OXNARD CA 93033-4501
 Board Certified: YES Phone: (805) 204-9500

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---|-------------------|------------------|
| Language(s): SPANISH Gender Affirming Care: No Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP | Fax: (805) 240-2128 | | |
| CHENG (VCMC),ANDREW | 2400 S C ST | | |
| Availability: OPEN Board Certified: 1016555 Language(s): MANDARIN Gender Affirming Care: No Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP | OXNARD CA 93033-4555 Phone: (805) 240-7000 Fax: (805) 486-0396 | | |
| DAVID (VCMC),JACOB | 300 HILLMONT AVE BLDG 340 #201 | | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | VENTURA CA 93003-3099 Phone: (805) 652-6100 Fax: (805) 652-3252 | | |
| DEGUZMAN (VCMC),DOROTHY | 300 HILLMONT AVE BLDG 340 STE 201 | | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No | VENTURA CA 93003-1651 Phone: (805) 652-6100 Fax: (805) 652-3252 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|--------------------------------|-----------------------------------|------------------|
| Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |
| DICKSTEIN (VCMC),SHERYL | 300 HILLMONT AVE BLDG 340 #201 | | |
| Availability: OPEN TO EXISTING | VENTURA CA 93003-3099 | | |
| Board Certified: YES | Phone: (805) 652-6100 | | |
| Language(s): | Fax: (805) 652-3252 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |
| FLOM (VCMC),SHEILA | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN | SIMI VALLEY CA 93065-2871 | | |
| Board Certified: YES | Phone: (805) 582-4000 | | |
| Language(s): SPANISH | Fax: (805) 579-6082 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | | | |
| FRANCKE (VCMC),WENDY | 133 W SANTA CLARA ST | 300 HILLMONT AVE BLDG 340 STE 201 | |
| Availability: OPEN TO EXISTING | VENTURA CA 93001-2543 | VENTURA CA 93003 | |
| Board Certified: YES | Phone: (805) 641-5600 | (805) 652-6100 | |
| Language(s): SPANISH | Fax: (805) 641-5677 | (805) 652-3252 | |
| Gender Affirming Care: No | | | |
| Group Affiliation: WEST VENTURA MEDICAL CLINIC | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|-------------------|------------------|
| GAREYS (VCMC),LYUDMYLA Availability: OPEN Board Certified: YES Language(s): RUSSIAN Gender Affirming Care: No Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | 1227 E LOS ANGELES AVE SIMI VALLEY CA 93065-2871 Phone: (805) 582-4000 Fax: (805) 579-6082 | | |
| HELMER (VCMC) JR,JAMES Availability: OPEN TO EXISTING Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | 300 HILLMONT AVE BLDG 340 #201 VENTURA CA 93003-3099 Phone: (805) 652-6100 Fax: (805) 652-3252 | | |
| JONES (VCMC),AMY Availability: OPEN Board Certified: 847909 Language(s): Gender Affirming Care: No Group Affiliation: MOORPARK FAMILY MEDICAL CLINIC | 612 SPRING RD BLDG A MOORPARK CA 93021-1820 Phone: (805) 523-5400 Fax: (805) 523-2233 | | |
| KARRA (VCMC),ANNAPURNA Availability: OPEN Board Certified: YES | 612 SPRING RD BLDG A MOORPARK CA 93021-1298 Phone: (805) 523-5400 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---|-------------------|------------------|
| Language(s): SPANISH Gender Affirming Care: No Group Affiliation: MOORPARK FAMILY MEDICAL CLINIC | Fax: (805) 523-2233 | | |
| KHAN (VCMC),TIPU V | 300 HILLMONT AVE BLDG 340 #201 | | |
| Availability: OPEN Board Certified: 971621 Language(s): SPANISH Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | VENTURA CA 93003-3099 Phone: (805) 652-6100 Fax: (805) 652-3252 | | |
| KROENING (VCMC),EMILY | 125 W THOUSAND OAKS BLVD STE 300 | | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP | THOUSAND OAKS CA 91360-4460 Phone: (805) 418-9100 Fax: (805) 370-0619 | | |
| LAMBING (VCMC),CHERYL | 300 HILLMONT AVE BLDG 340 #201 | | |
| Availability: OPEN TO EXISTING Board Certified: YES Language(s): Gender Affirming Care: No | VENTURA CA 93003-3099 Phone: (805) 652-6100 Fax: (805) 652-3252 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|-----------------------------------|-------------------|------------------|
| Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |
| LEVIN (VCMC),ANA A | 254 W HARVARD BLVD STE B | | |
| Availability: OPEN | SANTA PAULA CA 93060 | | |
| Board Certified: 1213854 | Phone: (805) 229-0200 | | |
| Language(s): SPANISH | Fax: (805) 921-1766 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SANTA PAULA WEST | | | |
| MILLER (VCMC),JEFFREY | 3801 LAS POSAS RD STE 214 | | |
| Availability: OPEN | CAMARILLO CA 93010-1426 | | |
| Board Certified: YES | Phone: (805) 437-0900 | | |
| Language(s): SPANISH | Fax: (805) 987-2878 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: LAS POSAS FAMILY MEDICAL GROUP | | | |
| MUELLER (VCMC),KHRISTINA M | 612 SPRING RD BLDG A | | |
| Availability: OPEN | MOORPARK CA 93021-1820 | | |
| Board Certified: YES | Phone: (805) 523-5400 | | |
| Language(s): SPANISH | Fax: (805) 523-2233 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: MOORPARK FAMILY MEDICAL CLINIC | | | |
| O'BRYAN-BECERRA (VCMC),CARLOS | 300 HILLMONT AVE BLDG 340 STE 201 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|--|--|------------------|
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: ACADEMIC FAMILY MEDICAL CENTER | VENTURA CA 93003 Phone: (805) 652-6100 Fax: (805) 652-3252 | | |
| PATTERSON (VCMC),STANLEY | 2220 E GONZALES RD STE 120A-B OXNARD CA 93036-8210 | | |
| Availability: OPEN TO EXISTING Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: MAGNOLIA WEST | Phone: (805) 981-5151 Fax: (805) 981-5150 | | |
| PHANG (VCMC),SAMUEL K | 2400 S C ST OXNARD CA 93033-0000 | | |
| Availability: OPEN Board Certified: YES Language(s): MANDARIN Gender Affirming Care: No Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP NORTH | Phone: (805) 240-7000 Fax: (805) 486-0396 | | |
| RAMIREZ (VCMC),CARMEN | 2400 SOUTH C ST OXNARD CA 93033-4555 | 325 W CHANNEL ISLANDS BLVD OXNARD CA 93033-4501 | |
| Availability: OPEN Board Certified: YES Language(s): | Phone: (805) 240-7000 Fax: (805) 486-0396 | (805) 204-9500 (805) 240-2128 | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|-------------------------------|-------------------|------------------|
| Gender Affirming Care: No Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP NORTH | | | |
| SENDAYDIEGO (VCMC),CATHERINE A | 2400 SOUTH C ST | | |
| Availability: OPEN | OXNARD CA 93033-4555 | | |
| Board Certified: YES | Phone: (805) 240-7000 | | |
| Language(s): | Fax: (805) 486-0396 | | |
| Gender Affirming Care: No Group Affiliation: LAS ISLAS FAMILY MEDICAL GROUP NORTH | | | |
| SERRANO (VCMC),VLADIMIR A | 2220 E GONZALES RD STE 120A-B | | |
| Availability: OPEN | OXNARD CA 93036-3707 | | |
| Board Certified: YES | Phone: (805) 981-5151 | | |
| Language(s): SPANISH | Fax: (805) 981-5325 | | |
| Gender Affirming Care: No Group Affiliation: MAGNOLIA WEST | | | |
| SOLINAS (VCMC),LISA | 845 N TENTH ST STE 3 | | |
| Availability: OPEN | SANTA PAULA CA 93060 | | |
| Board Certified: 283302 | Phone: (805) 525-0215 | | |
| Language(s): SPANISH | Fax: (805) 525-8031 | | |
| Gender Affirming Care: No | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|--------------------------------|--------------------------------------|------------------|
| Group Affiliation: SANTA PAULA HOSPITAL CLINIC (FQHC) | | | |
| SPORTELLI (VCMC),MARISA | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN | SIMI VALLEY CA 93065-2871 | | |
| Board Certified: 639424 | Phone: (805) 582-4000 | | |
| Language(s): SPANISH | Fax: (805) 579-6082 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | | | |
| WISNIEWSKI(VCMC),DANIELLE | 254 W HARVARD BLVD STE B | 300 HILLMONT AVE BLDG 340 STE 502 | |
| Availability: OPEN | SANTA PAULA CA 93060-3920 | VENTURA CA 93003 | |
| Board Certified: 1170754 | Phone: (805) 229-0200 | (805) 652-6524 | |
| Language(s): SPANISH | Fax: (805) 921-1766 | (805) 652-5983 | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SANTA PAULA WEST | | | |
| ZWOLAK (VCMC),ZACHARY | 300 HILLMONT AVE BLDG 340 #201 | | |
| Availability: OPEN | VENTURA CA 93003-3099 | | |
| Board Certified: 999651 | Phone: (805) 652-6100 | | |
| Language(s): FRENCH | Fax: (805) 652-3252 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ACADEMIC FAMILY MEDICINE CENTER | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|------------------------------------|-----------------|-------------------|------------------|
|------------------------------------|-----------------|-------------------|------------------|

PEDIATRICS

AL KURAIISHI (VCMC),MAYCE

300 HILLMONT AVE BLDG 340 STE
302

Availability: OPEN

VENTURA CA 93036

Board Certified: YES

Phone: (805) 604-4588

Language(s): FRENCH

Fax: (805) 604-7469

Gender Affirming Care: No

Group Affiliation: PEDIATRIC
DIAGNOSTIC CENTER

ARIZMENDI (VCMC),MARIA

2000 OUTLET CENTER DR STE 110

Availability: OPEN TO EXISTING

OXNARD CA 93036-0608

Board Certified: YES

Phone: (805) 604-4588

Language(s): SPANISH

Fax: (805) 604-7469

Gender Affirming Care: No

Group Affiliation: MANDALAY BAY
WOMEN &
CHILDREN'S MEDICAL

DAY-SCARINCI (VCMC),MORAG

1227 E LOS ANGELES AVE

Availability: OPEN

SIMI VALLEY CA 93065-2871

Board Certified: YES

Phone: (805) 582-4000

Language(s): SPANISH

Fax: (805) 579-6082

Gender Affirming Care: No

Group Affiliation: SIERRA VISTA FAMILY
MEDICAL CLINIC

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|-------------------|------------------|
| DEFOREST,IMELDA Availability: OPEN Board Certified: NO Language(s): SPANISH Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 1700 N ROSE AVE STE 280 OXNARD CA 93030 Phone: (805) 384-8071 Fax: (805) 278-6477 | | |
| DEKKERS,ROBERT J Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 243 MARCH ST SANTA PAULA CA 93060-2511 Phone: (805) 525-7131 Fax: (805) 525-0041 | | |
| DILLY,JOO-HYE P Availability: OPEN Board Certified: 1287459 Language(s): Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | 1700 N ROSE AVE STE 280 OXNARD CA 93030 Phone: (805) 384-8071 Fax: (805) 278-6477 | | |
| GARCIA (VCMC),SONYA | 2000 OUTLET CENTER DR STE 110 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|--|------------------|
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: MANDALAY BAY WOMEN & CHILDREN'S MEDICAL | OXNARD CA 93036-0608 Phone: (805) 604-4588 Fax: (805) 604-7469 | | |
| HARNEY (VCMC),REIS | 300 HILLMONT AVE BLDG 340 STE 302 | | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: PEDIATRIC DIAGNOSTIC CENTER | VENTURA CA 93003-3099 Phone: (805) 652-6255 Fax: (805) 641-4494 | | |
| JIANG (VCMC),KEYI | 125 W THOUSAND OAKS BLVD STE 300 | 2000 OUTLET CENTER DR STE 110 | |
| Availability: OPEN Board Certified: 1004898 Language(s): Gender Affirming Care: No Group Affiliation: CONEJO VALLEY FAMILY MEDICAL GROUP | THOUSAND OAKS CA 91360-4460 Phone: (805) 418-9100 Fax: (805) 370-0619 | OXNARD CA 93036-0608 (805) 604-4588 (805) 604-7469 | |
| KRISHNANKUTTY (VCMC),REKHA | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN | SIMI VALLEY CA 93065-2871 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---|-------------------|------------------|
| Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | Phone: (805) 582-4000 Fax: (805) 579-6082 | | |
| LU (VCMC), DANIEL M | 2000 OUTLET CENTER DR STE 110 | | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: MANDALAY BAY WOMEN & CHILDREN'S MEDICAL | OXNARD CA 93036-0608 Phone: (805) 604-4588 Fax: (805) 604-7469 | | |
| NARIAI (VCMC), SHIORI | 2000 OUTLET CENTER DR STE 110 | | |
| Availability: OPEN Board Certified: YES Language(s): JAPANESE Gender Affirming Care: No Group Affiliation: MANDALAY BAY WOMEN & CHILDREN'S MEDICAL | OXNARD CA 93036-0607 Phone: (805) 604-4588 Fax: (805) 604-7469 | | |
| NIAZI (VCMC), SUHAD | 300 HILLMONT AVE BLDG 340 #302 | | |
| Availability: OPEN Board Certified: YES Language(s): | VENTURA CA 93003-3099 Phone: (805) 652-6255 Fax: (805) 641-4494 | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--------------------------------|-------------------|------------------|
| Gender Affirming Care: No Group Affiliation: PEDIATRIC DIAGNOSTIC CENTER | | | |
| RINGNES (VCMC),JENNY | 1227 E LOS ANGELES AVE | | |
| Availability: OPEN | SIMI VALLEY CA 93065 | | |
| Board Certified: YES | Phone: (805) 582-4000 | | |
| Language(s): NORWEGIAN | Fax: (805) 579-6082 | | |
| Gender Affirming Care: No Group Affiliation: SIERRA VISTA FAMILY MEDICAL CLINIC | | | |
| RUIZ (VCMC),MELISSA | 300 HILLMONT AVE BLDG 340 #302 | | |
| Availability: CLOSED | VENTURA CA 93003-3099 | | |
| Board Certified: YES | Phone: (805) 652-6255 | | |
| Language(s): SPANISH | Fax: (805) 641-4494 | | |
| Gender Affirming Care: No Group Affiliation: PEDIATRIC DIAGNOSTIC CENTER | | | |
| SHARMA,NEHA | 1700 N ROSE AVE STE 280 | | |
| Availability: OPEN | OXNARD CA 93030 | | |
| Board Certified: 1287665 | Phone: (805) 384-8071 | | |
| Language(s): | Fax: (805) 278-6477 | | |
| Gender Affirming Care: No Group Affiliation: DIGNITY HEALTH MEDICAL GROUP VENTURA CO | | | |

DHMN-V Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|--|------------------|
| TRAN (VCMC),HANG Availability: OPEN Board Certified: YES Language(s): VIETNAMESE Gender Affirming Care: No Group Affiliation: PEDIATRIC DIAGNOSTIC CENTER | 300 HILLMONT AVE BLDG 340 STE 302 VENTURA CA 93003 | Phone: (805) 652-6255 Fax: (805) 641-4494 | |
| UNDERWOOD (VCMC),SHIRLEY L Availability: OPEN Board Certified: 1035012 Language(s): Gender Affirming Care: No Group Affiliation: MANDALAY BAY WOMEN & CHILDREN'S MEDICAL | 2000 OUTLET CTR DR STE 110 OXNARD CA 93036-0607 | Phone: (805) 604-4588 Fax: (805) 604-7469 | |