Wellstar

Wellstar Clinical Partners Directory

Summer 2022

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ADDICTION MEDICINE

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Kimberlynn R. Richards, MD

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ALLERGY & IMMUNOLOGY

CENTER FOR ALLERGY & ASTHMA OF GEORGIA, PC
William T. Boleman, MD; Eugene S. Hurwitz, MD; Neha Kharod, MD; Adesh D. Patel, MD; John Vickery, MD

Alpharetta Location
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Carrollton Location
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Griffin, GA 30224
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Kennesaw, GA 30144
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Smyrna, GA 30080
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WELLSTAR ALLERGY & ASTHMA - Chloe Lan Russo, MD; Belinda Graham, MD; Grace Chiang, MD

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ANESTHESIOLOGY

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BARIATRIC SURGERY

WELLSTAR COMPREHENSIVE BARIATRIC SERVICES
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WELLSTAR SURGICAL SPECIALISTS-COBB
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Smyrna, GA 30080-6443
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WELLSTAR GENERAL SURGERY
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BREAST SURGERY

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THE PHILIP ISRAEL BREAST CENTER
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ECHP Office Location
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Douglasville Location
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Hiram Location
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Marietta - Main Office Location
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Marietta, GA 30060-7271
Phone (770) 428-4486 Fax (770) 425-6008

Marietta - Kennestone Outpatient Pavilion Location
699 Church St NE Suite 210
Marietta, GA 30060
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Smyrna Location
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CARDIOLOGY

PEACHSTATE ADVANCE CARDIAC AND ENDOVASCULAR
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WELLSTAR CENTER FOR CARDIOVASCULAR CARE - MARIETTA
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WELLSTAR CENTER FOR CARDIOVASCULAR CARE - WEST GA
Samer Kabbani, MD

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LaGrange, GA 30240
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CARDIOTHORACIC SURGERY

WELLSTAR CENTER FOR CARDIOVASCULAR CARE - CV SURGERY
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CARDIOVASCULAR DISEASE

CARDIOLOGY ASSOCIATES OF ATLANTA, PC
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METRO ATL. LOCATION
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International Tower Suite 1200
Atlanta, GA 30303
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ACWORTH HP LOCATION
4550 Cobb Parkway Suite 213
Acworth, GA 30010
Phone (770) 974-8479 Fax (770) 974-8710

AUSTELL LOCATION
1700 Hospital South Drive Suite 409
Austell, GA 30106
Phone (770) 732-9100 Fax (770) 528-9924

AVALON HP LOCATION
2450 Old Milton Parkway Suite 206
Alpharetta, GA 30009
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CHEROKEE HP LOCATION
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Holly Springs, GA 30114
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COMPREHENSIVE CARE
175 White Street Suite 100
Marietta, GA 30060
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EAST COBB LOCATION
3747 Roswell Road NE Suite 213
Marietta, GA 30062
Phone (770) 321-3490 Fax (770) 321-3489

EP LOCATION
55 Whitcher Street Suite 160
Marietta, GA 30060
Phone (770) 424-6893 Fax (770) 528-9927

HIRAM LOCATION
144 Bill Carruth Parkway Suite 4200
Hiram, GA 30141
Phone (678) 324-4444 Fax (770) 528-9932

NORTH FULTON LOCATION
4500 Hospital Boulevard Suite 320
Roswell, GA 30076
Phone (770) 410-4520 Fax (770) 410-4525

STRUCTURAL LOCATION
55 Whitcher Street Suite 160
Marietta, GA 30060
Phone (770) 590-4180 Fax (770) 590-4186

VININGS HP LOCATION
4441 Atlanta Road SE Suite 213
Smyrna, GA 30080
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WEST GA LOCATION
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LaGrange, GA 30240
Phone (706) 242-5100 Fax (706) 812-2454

WOODSTOCK LOCATION
120 Stonebridge Parkway Suite 110
Woodstock, GA 30189
Phone (678) 324-4400 Fax (770) 528-9933

SPALDING LOCATION
619 S 8th Street Suite 301
Griffin, GA 30224
Phone (770) 229-6072 Fax (770) 229-2111

CARDIOVASCULAR DISEASE-PEDIATRIC

WELLSTAR CENTER FOR CARDIOVASCULAR CARE - PEDIATRIC CARDIOLOGY
Jeffrey Sacks, MD; Jonathan Yaari, MD

1180 Ernest Barrett Parkway Suite 102A
Kennesaw, GA 30144
Phone (470) 956-9171 Fax (770) 794-6652

CHIROPRACTOR

WELLSTAR CHIROPRACTIC
Robert Booth, DC; Charles Saboura, DC

Acworth Location
4900 Ivey Road Ste 1826
Acworth, GA 30101
Phone (470) 956-9000 Fax (678) 560-4343

Smyrna Location
562 Concord Rd SE
Smyrna, GA 30082
Phone (770) 384-9850 Fax (770) 384-9842

WELLSTAR SPINE CENTER
Charles Saboura, DC

3747 Roswell Road NE Suite 311
Marietta, GA 30062
Phone (470) 956-9000 Fax (678) 560-4343

COLON AND RECTAL SURGERY

WELLSTAR GENERAL SURGERY (CANTON RD)
Harry A. Liberman, MD

800 Canton Road NE,
Marietta, GA 30060
Phone (770) 424-4328 Fax (770) 426-9924

WELLSTAR TRAUMA ACUTE CARE SURGERY AT KENNESTONE
Jose E. Andujar, MD

55 Whitcher Street Suite 130
Marietta, GA 30060
Phone (770) 428-0462 Fax (770) 427-8001

WELLSTAR COLON & RECTAL SURGERY - VHP
Anushka Arumugasaamy, MD; Patrick Hammen, MD

4441 Atlanta Road SE Suite 312
Smyrna, GA 30080
Phone (470) 956-4219 Fax (678) 842-5542

CRITICAL CARE INTENSIVIST

WELLSTAR INTENSIVISTS
Walter Astorne, MD; Atul Bhatnagar, DO; Elias Chalhoub, MD; Sarvenaz Danesh, MD; Carlos Franco Palacios, MD; Brittany A. Hixon, MD; Frank T. Italiano III, MD; Rahul Kumar, MD; Sean Lee, MD; Jason Oh, MD; Surya Palakuru, MD; Aamer Rahman, MD; Ajai , Rajabalan, MD; Asif A. Saberi, MD; Debdoot Saha, MD; Keegan Tupchong, MD

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WELLSTAR PULMONARY MEDICINE - N. FULTON
Absar Mirza, MD

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DERMATOLOGY

ADVANCED DERMATOLOGY, PC
Amr A. Agha, MD

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Douglasville, GA 30135
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ATLANTA CENTER FOR DERMATOLOGIC DISEASES, PC
Kevin Berman, MD; Tamu Brown, MD; Sridhar Dronavalli, MD; Kenneth Ellner, MD; David Levine, MD; Shaanan Shetty, MD; Judith Silverstein, MD; Martin Weil, MD

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Atlanta Location
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Roswell Location
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DOUGLAS DERMATOLOGY AND SKIN CANCER SPECIALISTS, LLC
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GOODMAN DERMATOLOGY
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Canton Location
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Phone (770) 755-5890

Roswell Location
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Roswell, GA 30076
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West Cobb Location
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METRODERM, PC
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Roswell Location
11755 Pointe Place Suite B 2
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PEDIATRIC ATLANTA WEST DERMATOLOGY & SURGERY CENTER (ADULT AND PEDIATRIC)
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Phone (770) 732-1137 Fax (770) 732-2081

SKIN CANCER SPECIALISTS, PC
Jennifer L. Buckley, MD; Mark A. Chastain, MD; Lauren A. Daugherty, MD; Matthew P. Hughes, MD; Jennifer Jones, MD; Hailey Rouhana, MD

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WOODSTOCK DERMATOLOGY, PC
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DERMATOPATHOLOGY

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Lynn Cooper, MD

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Marietta, GA 30060
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DIAGNOSTIC RADIOLOGY

GEORGIA RADIOLOGY SERVICES, LLC [APOLLO MD]
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Phone (770) 874-5400 Fax (678) 235-6709

QUANTUM RADIOLOGY NORTHWEST, PC
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790 Church Street Suite 400
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EMERGENCY MEDICINE

GEORGIA EMERGENCY GROUP, LLC [APOLLO MD]
Brenden L. Akins, MD; Zachery Austin, MD; Sambita Bellman, MD; Nikkia Blake, MD; Frank A. Brown, MD; Justin Carroll, MD; James H. Carter, Jr, MD; Debra Cooper, MD; John R. Corbin, MD; Swetang P. Desai, MD; Nancy Chinelo Osuji-Oduh Echefu, MD; Ankur Fadia, MD; Fun Fong, Jr, MD; Andrew Frei, MD; Thomas L. Garcia, DO; Rosiland L. Harrington, MD; Robert J. Hull, MD; Khurram Khan, MD; Brian Kho, MD; David Kocherla, MD; Wesley L. Leigh, MD; Eric Mabo, MD; Vijay Mahathre, MD; Deon Miller, DO; Ajay Mistry, DO; Caitlin Mueller, DO; Ezaldeen Numur, MD; Samuel C. Obiorah, MD; Maxine Owusu, MD; Charles Pereyra, MD; Jehangir T. Pirzada, DO; Jonathan Reines, MD; Daryl Sherrod, MD; Tajudeen Soyoye, MD; Peyton Syed, MD; Navin Tandon, DO; Rishi Thakarar, DO; Moshe Usadi, MD; Nilam Vaughan, DO; Jamie W. Walraven, MD; Samuel Wright, MD

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LAGRANGE EMERGENCY PHYSICIANS, LLC [APOLLO MD]
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MEDLIFE URGENT CARE
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McDonough, GA 30253
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Marianne F. Taryla, MD

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Ragheed Alturkmani, MD; Juan Carlos Armstrong, MD; Faisal M. Bhutta, MD; Jessie Chai, MD; Christopher Chan, DO; Jonathan Y. Chen, DO; Robert B. Copeland, MD; Rupesh Dave, MD; William T. Dowdell, MD; Samuel Durrett, MD; Salman S. Fidahussein, MD; Russell E. French, MD; Amyn Hirani, MD; Rhiannon Holden, MD; Nidhi Huff, MD; Jody M. Hughes, MD; Nora C. Hurt, MD; Sajin M. Karakattu, MD; Neelima Kothari, MD; Michael Lava, MD; Sachin Lavania, MD; Jeffrey E. Michaelson, MD; Eduardo J. Molinary, MD; Alan R. Muster, MD; Shashank Nuguru, MD; Ariyo O. Olobatoke, MD; Hiren V. Patel, MD; Hitendra K. Patel, MD; Chirag Popat, MD; Vineet Reddy, MD; Medel A. Reyes, MD; Ramin Saghafi, MD; Mark Schlosberg, MD; Safal Shetty, MD; Aseem Shrivastava, MD; Richard Sandy Simmons, MD; Abdalsamih Taeb, MD; Timothy N. Udoji, MD; John C. Williams MD

Acworth Location
4550 Cobb Parkway Suite 210
Acworth, GA 30101
Phone (770) 422-1372 Fax (770) 423-9651

Austell Location
1664 Mulkey Road
Austell, GA 30106
Phone (770) 422-1372 Fax (770) 999-2599

Douglasville Location
6095 Professional Parkway Suite A200
Douglasville, GA 30134
Phone (770) 422-1372 Fax (770) 999-2611

Hiram Location
148 Bill Carruth Parkway Suite 100
Hiram, GA 30141
Phone (770) 422-1372 Fax (770) 999-2610

LaGrange Location
1551 Doctors Drive
LaGrange, GA 30240
Phone (706) 880-7222 Fax (706) 880-7223

Marietta Location
400 Tower Road Suite 200
Marietta, GA 30060
Phone (770) 422-1372 Fax (770) 999-2488

Roswell Locations
2500 Hospital Blvd Suite 200
Roswell, GA 30076
Phone (770) 410-4661 Fax (770) 410-4664

4500 Hospital Boulevard Suite 310
Roswell, GA 30076
Phone (770) 410-4366 Fax (770) 999-2695

Smyrna Location
4441 Atlanta Road SE Suite 217
Smyrna, GA 30080
Phone (770) 422-1372 Fax (770) 999-2600

Woodstock Location
120 Stonebridge Parkway Suite 320
Woodstock, GA 30189
Phone (770) 422-1372 Fax (770) 999-2675

PULMONARY DISEASE/SLEEP MEDICINE

SOUTH ATLANTA PULMONARY & CRITICAL CARE ASSOCIATES, LLC
Rao Mikkilineni, MD

483 Upper Riverdale Rd SW Suite A
Riverdale, GA 30274
Phone (770) 991-3888 Fax (770) 994-0278

RADIATION ONCOLOGY

WELLSTAR RADIATION ONCOLOGY
Sheree E. Brown, MD; Adam Ferro, MD; Rohit Gunan Ganju, MD; Justin P. Hart, MD; Lorie Lane Hughes, MD; Mark P. McLaughlin, MD; Olusola Obayomi-Davies, MD; Nasarachi Onyeuku, MD; Rakendu P. Shukla, MD; Robert Taylor, MD; William W. Thoms, MD

Austell Location
1800 Hospital South Drive
Austell, GA 30106
Phone (770) 948-6000 Fax (770) 948-2638

Hiram Location
148 Bill Carruth Parkway Suite LL30
Hiram, GA 30141
Phone (470) 644-8140 Fax (770) 443-6654

LaGrange Location
111 Medical Drive
LaGrange, GA 30240
Phone (706) 845-3544 Fax (706) 812-2361

Marietta Location
320 Kennestone Ho spital Blvd Suite LL1
Marietta, GA 30060
Phone (770) 793-7500 Fax (770) 793-7985

Roswell Location
4500 Hospital Boulevard Suite 100
Roswell, GA 30076
Phone (770) 793-7550 Fax (770) 793-7985

RADIOLOGY

GEORGIA RADIOLOGY SERVICES, LLC [APOLLO MD]
Naveed I. Alvi, MD; Bradley Amerson, MD; Kha Nguyen, MD; Kimone R. Nicola, MD; Courtney Perez, MD; Timothy Russell, MD

5665 New Northside Dr Suite 320
Atlanta, GA 30328
Phone (770) 874-5400 Fax (770) 874-5433

QUANTUM RADIOLOGY NORTHWEST, PC
Andrew J. Bosserman, MD; Michael Collins, MD; Nicholas W. Faulconer, MD; Margaret Fleming, MD; Ankit V. Gandhi, MD; Tyler J. Gleason, MD; Bhargavi Guddanti, MD; Merissa Garvey Harris, MD; Asad A. Hayat, DO; Eric H. Huh, MD; Barry F. Jeffries, MD; Pramod Kaila, MD; Frederick A. Kebbel, MD; Adam H. Khan, MD; Philip Louden, MD; Max P. Mam, MD; Arthur L. Mulick, MD; Milind Patel, MD; Kimberly A. Spencer, MD

790 Church Street Suite 400
Marietta, GA 30060
Phone (678) 581-3830 Fax (678) 581-3680

S&S IMAGING ASSOCIATES, LLC
Naveed Alvi, MD; Nausheen Naveed, MD; James Whitaker, MD

601 S 8th Street
Griffin, GA 30224
Phone (770) 874-5449

REHABILITATION MEDICINE

WELLSTAR REHABILITATION MEDICINE
Dana Norall, MD; Roman Piraner, MD; Karin Taylor, MD

Marietta Location
100 Lacy Street Building 220 Suite 150
Marietta, GA 30060

Phone (770) 793-7635 Fax (770) 793-7645

LaGrange Location
1555 Doctors Drive Suite 102
LaGrange, GA 30240
Phone (706) 298-5592 Fax (770) 999-2205

REPRODUCTIVE ENDOCRINOLOGY

GEORGIA REPRODUCTIVE SPECIALISTS, LLC
Pavna M. Brahma, MD; Valerie R. Libby, MD

5445 Meridian Mark Road Suite 270
Atlanta, GA 30342
Phone (404) 843-2229 Fax (404) 843-0812

RHEUMATOLOGY

ARTHRITIS & RHEUMATOLOGY CENTER, PC
Serene Francis, MD; Ashly E. Joseph, MD; Omar Khan, MD; Taik Kim, MD; Jatin Patel, MD; Naveen Raj, MD

Cumming Location
102 Mary Alice Park Road Suite 805
Cumming, GA 30040
Phone (770) 284-3150 Fax (770) 284-3170

Roswell Locations
11685 Alpharetta Hwy Suite 120
Roswell, GA 30076
Phone (770) 284-3150 Fax (770) 284-3170

11731 Pointe Place
Roswell, GA 30076
Phone (770) 284-3150 Fax (770) 284-3170

MARIETTA RHEUMATOLOGY ASSOCIATES, PC
Mohammed Y. Abubaker, MD; Ritesh Kohli, MD; Roel Querubin, MD

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Phone (770) 590-8328 Fax (770) 590-8231

WELLSTAR RHEUMATOLOGY - AMC
William J. Chun, MD

285 Boulevard NE Suite 625
Atlanta, GA 30312
Phone (404) 265-3330 Fax (404) 265-3357

WELLSTAR RHEUMATOLOGY - DOUGLASVILLE
Keith Rott, MD

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Phone (770) 333-2035 Fax (770) 999-2842

WELLSTAR RHEUMATOLOGY - LAGRANGE
Sana M. Makhdoom, MD

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LaGrange, GA 30240
Phone (706) 880-7465 Fax (706) 880-7466

WELLSTAR RHEUMATOLOGY - VHP/SMYRNA
Keith Rott, MD; Bijal Vashi, MD; Kelly O. Weselman, MD

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Smyrna, GA 30080
Phone (770) 333-2035 Fax (770) 333-2059

WELLSTAR RHEUMATOLOGY ASSOCIATES
Sedrick Jermaine Bradley, MD; Mohammad Kamran, MD; Cara McLeod, DO; Madhavi Siddhanthi, MD; Xena Whittier, MD

Alpharetta Location
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Phone (770) 420-1690 Fax (770) 420-1661

Marietta Location
400 Tower Road Suite 160
Marietta, GA 30060
Phone (770) 420-1690 Fax (770) 420-1661

Woodstock Location
120 Stonebridge Parkway Suite 210
Woodstock, GA 30189
Phone (770) 420-1690 Fax (770) 420-1661

STROKE NEUROHOSPITALIST

STROKE NEUROHOSPITALIST (HOSPITAL BASED)
Chuan Frances Fan, MD; Kyle Grubbs, MD; Ovais Inamullah, MD; Kumiko Owada, MD; Ashis Hari Tayal, MD

677 Church Street
Marietta, GA 30060
Phone (770) 422-2326 Fax (770) 422-7237

SURGICAL CARE

JOSEPH M. STILL BURN CENTERS, INC.
Neha Amin, MD

3950 Austell Road 2North
Austell, GA 30106
Phone (706) 863-9595 Fax (888) 745-3917

SURGICAL ONCOLOGY

WELLSTAR SUMMIT SURGICAL
Sartaj S. Sanghera, MD; Sahir Shroff, MD

590 Nancy Street
Marietta, GA 30060
Phone (770) 423-0395 Fax (770) 499-0352

THORACIC SURGERY

WELLSTAR THORACIC SURGERY ASSOCIATES
Daniel L. Fortes, MD; Ki Wan Kim, MD; William R. Mayfield, MD; Theolyn Price, MD

61 Whitcher Street Suite 4120
Marietta, GA 30060
Phone (770) 424-9732 Fax (678) 888-0550

TRAUMA ACUTE CARE

WELLSTAR TRAUMA ACUTE CARE SURGERY AT KENNESTONE
Christine Castater, MD; Ginger Justice, MD

55 Whitcher Street Suite 130
Marietta, GA 30060
Phone (770) 428-0462 Fax (770) 427-8001

TRAUMA SURGERY

WELLSTAR SURGICAL SPECIALISTS OF ATLANTA
John Bliton, MD; Stacy Dougherty, MD; Thuy Pham, MD

315 Boulevard NE Suite 500
Atlanta, GA 30312
Phone (404) 265-3635 Fax (404) 265-3634

WELLSTAR TRAUMA ACUTE CARE SURGERY AT KENNESTONE
Keren "Aviva" Bashan-Gilzenrat, MD; William Peery, MD; Roberto Taarea, MD

55 Whitcher Street Suite 130
Marietta, GA 30060
Phone (770) 428-0462 Fax (770) 427-8001

WELLSTAR TRAUMA AND ACUTE CARE SURGERY AT COBB
Barry M. Renz, MD

1700 Hospital South Dr Suite 202
Austell, GA 30106
Phone (770) 944-7818 Fax (770) 944-6402

URGENT CARE

KSU STUDENT HEALTH CLINIC
Chhavi V. Noohani, DO

3215 Campus Loop Rd
Kennesaw, GA 30144
Phone (470) 578.6644

URGENCARE LLC
Abayomi Oshinowo, MD;Angampally Rajeev, MD

2169 West Point Rd Suite 300
LaGrange, GA 30240
Phone (706) 668-5140 Fax (706) 668-5142

WELLSTAR URGENT CARE
Karla Booker MD; William Kevin Broyles MD; Daquesha Chever MD; David T. Derrer MD; Yuliyan Donchev MD; Duska V. Dyer MD; Latoya Etheridge MD; Rachel Gallen DO; Carlos M. Garcia MD; Tyra Harris MD; Alexandra Havlik MD; Charles C. Hoff MD; Mihaela Ille MD; Bader Kashlan MD; Mali S. Khamissi MD; Benjamin R. Lawless MD; JoBeth Lee MD; Kalpit C. Patel MD; Rutvi Patel MD; Arash Ravanmehr MD; Jorge Rodriguez DO; Mark D. Salsberry MD; Joseph Saulsbury MD; Michael D. Simpson MD; Leah Skjei MD; Christopher L. Stevens MD; Pelham Williams MD; Tian Xia MD; Justin Yoon DO; Shayan Zafrani MD

Acworth Location
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Phone (470) 956-0100 Fax (770) 529-0279

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12460 Crabapple Road Suite 901
Alpharetta, GA 30004
Phone (678) 762-0574 Fax (770) 751-8271

5655 Atlanta Highway Suite A
Alpharetta, GA 30004
Phone (770) 343-6364 Fax (770) 343-6368

Atlanta Location
3730 Carmia Drive SW Suite 110
Atlanta, GA 30331
Phone (404) 330-9397 Fax (404) 344-1310
Phone (404) 344-7286

Canton Location
3805 Cherokee Street NW
Canton, GA 30114
Phone (770) 426-5665 Fax (770) 420-1792

Dallas Location
120 Greystone Power Blvd Suite 110
Dallas, GA 30157
P (470) 267-1540

Holly Springs Location
1120 Wellstar Way Suite 105
Holly Springs, GA 30114
Phone (678) 494-2500 Fax (678) 494-2629

Kennesaw Location
3805 Cherokee Street
Kennesaw, GA 30144
Phone (770) 426-5665 Fax (770) 420-1792

Marietta Locations
818 Church St
Marietta GA 30060
Phone (770) 590-4190 Fax (770) 590-4191

3747 Roswell Road NE Suite 107
Marietta, GA 30062
Phone (470) 956-0150 Fax (678) 560-5947

3600 Sandy Plains Road
Marietta, GA 30066
Phone (770) 977-4547 Fax (770) 977-8354

2890 Delk Road SE
Marietta GA 30067
Phone (770) 955-8620 Fax (770) 955-0377

Roswell Location
1360 Upper Hembree Rd Suite 100
Roswell, GA 30076
Phone (470) 956-4430 Fax (770) 360-9548

Smyrna Locations
4480 North Cooper Lake Road Suite 100
Smyrna, GA 30082
Phone (770) 333-1300

4441 Atlanta Road SE Suite 107
Smyrna, GA 30080
Phone (470) 956-0330

WELLSTAR URGENT CARE FLOAT POOL
JoBeth Lee, MD

UROGYNECOLOGY

WELLSTAR UROGYNECOLOGY
Catherine Hudson, MD; Deborah Karp, MD; Felicia LaVetta Rhaney, MD; LaSonya S. Roberts-Lopez, MD

Acworth Location
4900 Ivey Rd Suite 1320
Acworth, GA 30101
Phone (470) 267-0872 Fax (770) 999-2751

Atlanta Location
3886 Princeton Lakes Way Suite 160
Atlanta, GA 30331
Phone (404) 530-3041 Fax (404) 530-3053

Hiram Location
148 Bill Carruth Pkwy Suite 260
Hiram, GA 30141
Phone (470) 956-4050 Fax (770) 505-4101

Marietta Locations
699 Church Street Suite 235
Marietta, GA 30060
Phone (770) 590-4175 Fax (770) 590-5174

3747 Roswell Road NE Suite 318
Marietta, GA 30062
Phone (770) 590-4175 Fax (770) 590-4174

Smyrna Location
4441 Atlanta Road SE Suite 319
Smyrna, GA 30080
Phone: (404) 530-3041 Fax: (404) 530-3053

UROLOGY

ATLANTA COSMETIC UROLOGY, LLC
Tariq S. Hakky, MD

371 East Paces Ferry Road NE Suite 550
Atlanta, GA 30305
Phone (404) 400-3120 Fax (404) 481-2454

ATLANTA UROLOGICAL GROUP
Thomas W. Schoborg, MD

285 Boulevard NE Suite 215
Atlanta, GA 30312
Phone (404) 524-5082 Fax (404) 768-2336

GEORGIA REGIONAL UROLOGY
David Perlow, MD

2520 Windy Hill Road Suite 305
Marietta, GA 30067
Phone (770) 951-0866 Fax (770) 933-0209

M RAMZY HAJMURAD, MD, PC
M.Ramzy Hajmurad, MD

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Austell, GA 30106
Phone (770) 941-8508 Fax (770) 941-8542

SOUTH ATLANTA UROLOGY GYNECOLOGY
Donald A. Culley, MD

5400 Laurel Springs Pkwy Bldg 1400 Suite 1403
Suwanee, GA 30024
Phone (678) 904-5211 Fax (678) 904-5212

WELLSTAR UROLOGY
Joseph Acquaye, MD; Odinaka Akunne, MD; Paul Alphonse, MD; Anand V. Badri, MD; Kristin Michelle Boren, MD; Michael Bryant, MD; Thomas H. Chun, MD; Beau N. Dusseault, MD; Thomas E. Emerson, MD; Robert Steven Gerhard, MD; Sophie Goodridge, MD; Benjamin Harper, MD; Richard H. Jadick DO Reena Kabaria, MD; Akash Kapadia, MD; Keith Levinson, MD; Adarsh Manjunath, MD; Scott Miller, MD; Daniel Mollengarden, MD; Gaspar M. Msangi, MD; Paymon Nourparvar, MD; Nikolas P. Symbas, MD; Deena E. Theiss, MD; Murphy F. Townsend III, MD; Justin M. Watson, MD

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Alpharetta Location
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Phone (470) 267-0420 Fax (770) 410-4985

Austell Location
1700 Hospital South Drive Suite 404
Austell, GA 30106
Phone (770) 428-4475 Fax (770) 948-1275

Douglasville Location
4904 Timber Ridge Drive Suite 202
Douglasville, GA 30135
Phone (770) 428-4475 Fax (770) 999-2754

Hiram Location
144 Bill Carruth Parkway Suite 2300
Hiram, GA 30101
Phone (770) 428-4475 Fax (678) 363-8836

Holly Springs Location
1120 Wellstar Way Suite 302
Holly Springs, GA 30114
Phone (770) 428-4475 Fax (770) 999-2193

LaGrange Location
1555 Doctors Drive Suite 101
LaGrange, GA 30240
Phone (706) 242-5201 Fax (706) 242-5204

Marietta Locations
55 Whitcher Street NE Suite 250
Marietta, GA 30060
Phone (770) 428-4475 Fax (770) 426-1499

3747 Roswell Road Suite 317
Marietta, GA 30062
Phone (770) 428-4475 Fax (678) 560-4347

Roswell Location
2500 Hospital Blvd Suite 290
Roswell, GA 30076
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Smyrna Location
4441 Atlanta Road SE Suite 317
Smyrna, GA 30080
Phone (470) 956-4220 Fax (678) 842-5545

VASCULAR NEUROLOGY

WELLSTAR NEUROSURGERY - MARIETTA
Rishi Gupta, MD

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Marietta, GA 30060
Phone (770) 422-2326

VASCULAR SURGERY

VASCULAR SURGICAL ASSOCIATES, PC
Arun . Chervu, MD; Michael R. Corey, MD; Gary M. Jacobson, MD; John E. Jones, MD; Joyce Kim, MD; Emily Lagergren, MD; Alykhan M. Lalani, MD; Steven W. Oweida, MD; Anand B. Parikh, MD; Jeffrey M. Reilly, MD; Shariq . Sayeed, MD; Jeffrey N. Winter, MD; Charles W. Wyble, MD

Alpharetta Location
5755 Northpoint Pkwy Suite 214
Alpharetta, GA 30022
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Austell Location
2041 Mesa Valley Way Suite 185
Austell, GA 30106
Phone (770) 423-0595 Fax (770) 745-2290

Douglasville Location
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Douglasville, GA 30134
Phone: (770) 423-0595 Fax: (678) 388-1627

Hiram Location
148 Bill Carruth Parkway Suite 380
Hiram GA 30141
Phone (770) 423-0595 Fax (770) 874-2082

Marietta Location
61 Whitcher St Suite 2100
Marietta GA 30060
Phone (770) 423-0595 Fax (678) 391-5055

Smyrna Location
4441 Atlanta Road SE Suite 316
Smyrna, GA 30080
Phone: (770) 423-0595 Fax: (770) 423-5991

Woodstock Location
100 Stoneforest Dr Suite 130
Woodstock, GA 30189
Phone (770) 423-0595 Fax (678) 388-1627

WOUND CARE/BURN

JOSEPH M. STILL BURN CENTERS, INC.
Claus Brandigi, MD; James B. Collins, MD; Derek M. Culnan, MD; Shawn P. Fagan, MD; Bounthavy Homsombath, MD; Haaris S. Mir, MD

3950 Austell Road 2North
Austell, GA 30106
Phone (706) 863-9595 Fax (888) 745-3917

WOUND CARE/HYPERBARIC MEDICINE

WELLSTAR WOUND CARE - LAGRANGE
Janese Latimer-Pierson, MD

1600 Vernon Road Suite G
LaGrange, GA 30240
Phone (706) 880-7366 Fax (706) 880-7299

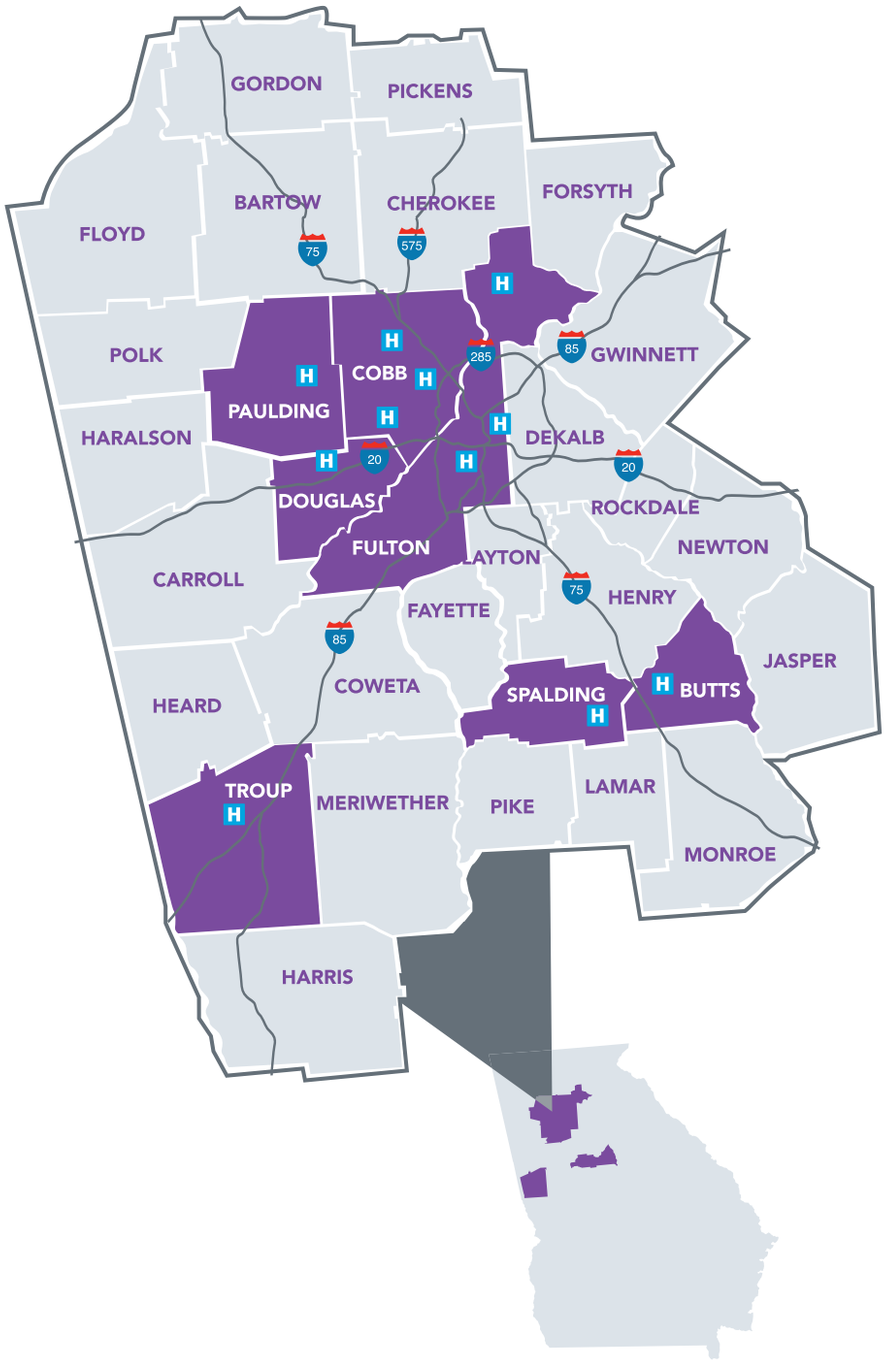
WELLSTAR OUTPATIENT WOUND CARE AND HYPERBARIC CENTER (DH)
India C. Williams, MD

8954 Hospital Drive Bldg C
Douglasville, GA 30134
Phone (770) 947-3000 Fax (770) 947-3012

WELLSTAR WOUND CARE AND HYPERBARIC MEDICINE
Brent Clower, DO; Ricardo M. Duran, DO

3000 Hospital Blvd 1st Floor Wound Care,
Roswell, GA 30076
Phone (770) 751-2830 Fax (770) 751-2831

HOSPITAL LOCATIONS



Wellstar Atlanta Medical Center
303 Parkway Drive NE
Atlanta, GA 30312
(404) 265-4000

Wellstar Atlanta Medical Center South
1170 Cleveland Avenue
East Point, GA 30344
(404) 466-1170

Wellstar Cobb Hospital
3950 Austell Road SW
Austell, GA 30106
(470) 732-4000

Wellstar Douglas Hospital
8954 Hospital Drive
Douglasville, GA 30134
(770) 949-1500

Wellstar Kennestone Hospital
677 Church Street
Marietta, GA 30067
(770) 793-5000

Wellstar North Fulton Hospital
3000 Hospital Boulevard
Roswell, GA 30076
(770) 751-2500

Wellstar Paulding Hospital
2518 Jimmy Lee Smith Parkway
Hiram, GA 30141
(470) 644-7000

Wellstar Spalding Regional Hospital
601 South 8th Street
Griffin, GA 30114
(770) 228-2721

Wellstar Sylvan Grove Hospital
1050 McDonough Road
Jackson, GA 30233
(770) 775-7861

Wellstar West Georgia Medical Center
1514 Vernon Road
LaGrange, GA 30240
(706) 882-1411

Wellstar Windy Hill Hospital
2540 Windy Hill Road
Marietta, GA 30067
(770) 644-1000

Wellstar
Clinical Partners

PROVIDER DEMOGRAPHIC DATA CHANGE FORM

Practice Name:

PLEASE SELECT YOUR APPROPRIATE WELLSTAR AFFILIATION(S)

☐ WellStar Medical Group (WMG)	☐ WellStar Clinical Partners (WCP)	☐ Accountable Care Organization (ACO)	☐ WellStar Employee Plan ONLY

Provider type: ☐ MD ☐ DO ☐ DPM ☐ Other: _____

PRACTICE DEMOGRAPHIC CHANGE ONLY

Please include updated practice W9s for any respective changes and send along with completed form

Previous Practice Name:	New Practice Name:
Previous Practice TIN:	New Practice TIN:
Practice Billing Address:	
Previous Practice Address:	New Practice Address:
Changes to Phone, Fax, or Email:	

PROVIDER DEMOGRAPHIC CHANGE ONLY

Please include updated provider W9s for any respective changes and send along with completed form

Provider Previous Last Name:	Provider Previous First Name:	Provider Previous Middle Name:
Provider New Last Name:	Provider New First Name:	Provider New Middle Name:
Previous Provider NPI:	New Provider NPI:	
Changes to Phone, Fax, or Email:		

NEW PROVIDER JOINING PRACTICE

HAS A WELLSTAR HOSPITAL CREDENTIALING APPLICATION BEEN COMPLETED FOR THIS PROVIDER?

☐ YES | Please provide date of submission or effective date of committee approval _____/_____/_____

☐ NO | Please send an email to Medical Staff Services at medstaffapp@wellstar.org to request an application for hospital membership/privileges. Please indicate in the email if you are requesting basic hospital affiliation for WCP membership purposes only or if you require clinical privileges.

HAS A WELLSTAR MANAGED CARE CREDENTIALING APPLICATION BEEN COMPLETED FOR THIS PROVIDER?

☐ YES | Please provide date of submission or effective date of committee approval _____/_____/_____

☐ NO

IS THE PROVIDER BOARD CERTIFIED?

☐ YES | Please provide date of certification ____/_____/_____ and expiration date ____/_____/_____
| Please indicate the certifying body _____

☐ NO | Please indicate date of residency/fellowship completion _____/_____/_____

DOES THE PROVIDER PARTICIPATE IN AN SIGNIFICANT JOINT VENTURE OR MANAGEMENT, CONSULTING OR SERVICE ARRANGEMENT WITH A HOSPITAL OR HEALTH SYSTEM OTHER THAN WELLSTAR HEALTH SYSTEM OR ITS AFFILIATES? FOR EXAMPLE, PROVIDER HAS A SERVICE ARRANGEMENT/AGREEMENT WHERE YOU PROVIDE MEDICAL SERVICES AT A COMPETING HOSPITAL. ☐ YES | If yes, please explain each arrangement and identify the other party _____ ☐ NO

DOES THE PROVIDER SERVE AS AN EMPLOYEE, INDEPENDENT CONTRACTOR, TRUSTEE, DIRECTOR, PARTNER, GENERAL MANAGER, OFFICER, AGENCT, A DVISOR IN ANY OTHER SIMILAR LEADERSHIP/GOVERNANCE ROLE OR CAPACITY (OTHER THAN AS A MEDICAL STAFF LEADER) WITH ANY HEALTHCARE PROVIDER, SYSTEM, NETWORK, HEALTH PLAN, INSURER OR OTHER ORGANIZATION WHICH IS OR MAY BE A COMPETITOR OF WELLSTAR HEALTH SYSTEM O R ITS SUBSIDIARIES OR AFFILIATES? FOR EXAMPLE, AN EMPOYEE/DIRECTOR RELATIONSHIP AT A COMPETING HOSPITAL. ☐ YES | If yes, for each such relationship, please identify the entity and describe the role played by the member of your group_____ ☐ NO

HAS THE PROVIDER EVER BEEN SUSPENDED OR EXCLUDED FROM PARTICIPATON IN A FEDERAL OR STATE GOVERNMENTAL HEALTHCARE PROGRAM IN THE LA ST FIVE (5) YEARS? ☐ YES | if yes, please provide specific information regarding such suspension or exclusion ☐ NO

Provider Last Name:	Provider First Name:	Provider Middle Name:
Provider NPI:	Primary Specialty:	Secondary Specialty:

EXISTING PROVIDER LEAVING PRACTICE (TERM REQUEST)

ACO PROVIDERS, PLEASE EMAIL A SIGNED TERM LETTER TO provider.relations@wellstar.org

Provider Last Name:	Provider First Name:	Provider Middle Name:
Provider NPI:	REASON FOR TERM: ☐ Leaving Service Area/Relocation ☐ Joining Another Practice ☐ Retiring ☐ Deceased ☐ OTHER: _____	

PLEASE CONFIRM AND NOTE THE REQUESTED EFFECTIVE DATE OF TERMINATION_____/_____/_____

AUTHORIZED SIGNATURE

Person Authorized to Make Changes (Print Name & Title):	Signature:	Email:	Date:

Please complete one form for EACH provider in the practice. Once completed, please email to provider.relations@wellstar.org or wellstarclinicalpart@wellstar.org. To fax, please send to (770) 563-0736.

Please use this Provider Demographic Data Change Form to submit all changes.
Once completed, please email to provider.relations@Wellstar.org or Wellstarclincalpart@Wellstar.org.
To fax, please send to (770) 999-2387.

Wellstar
Clinical Partners

PROVIDER DEMOGRAPHIC DATA CHANGE FORM

Practice Name:

PLEASE SELECT YOUR APPROPRIATE WELLSTAR AFFILIATION(S)

☐ WellStar Medical Group (WMG)	☐ WellStar Clinical Partners (WCP)	☐ Accountable Care Organization (ACO)	☐ WellStar Employee Plan ONLY

Provider type: ☐ MD ☐ DO ☐ DPM ☐ Other: _____

PRACTICE DEMOGRAPHIC CHANGE ONLY

Please include updated practice W9s for any respective changes and send along with completed form

Previous Practice Name:	New Practice Name:
Previous Practice TIN:	New Practice TIN:
Practice Billing Address:	
Previous Practice Address:	New Practice Address:
Changes to Phone, Fax, or Email:	

PROVIDER DEMOGRAPHIC CHANGE ONLY

Please include updated provider W9s for any respective changes and send along with completed form

Provider Previous Last Name:	Provider Previous First Name:	Provider Previous Middle Name:
Provider New Last Name:	Provider New First Name:	Provider New Middle Name:
Previous Provider NPI:	New Provider NPI:	
Changes to Phone, Fax, or Email:		

NEW PROVIDER JOINING PRACTICE

HAS A WELLSTAR HOSPITAL CREDENTIALING APPLICATION BEEN COMPLETED FOR THIS PROVIDER?

☐ YES | Please provide date of submission or effective date of committee approval _____/_____/_____

☐ NO | Please send an email to Medical Staff Services at medstaffapp@wellstar.org to request an application for hospital membership/privileges. Please indicate in the email if you are requesting basic hospital affiliation for WCP membership purposes only or if you require clinical privileges.

HAS A WELLSTAR MANAGED CARE CREDENTIALING APPLICATION BEEN COMPLETED FOR THIS PROVIDER?

☐ YES | Please provide date of submission or effective date of committee approval _____/_____/_____

☐ NO

IS THE PROVIDER BOARD CERTIFIED?

☐ YES | Please provide date of certification ____/_____/_____ and expiration date ____/_____/_____
| Please indicate the certifying body _____

☐ NO | Please indicate date of residency/fellowship completion _____/_____/_____

DOES THE PROVIDER PARTICIPATE IN AN SIGNIFICANT JOINT VENTURE OR MANAGEMENT, CONSULTING OR SERVICE ARRANGEMENT WITH A HOSPITAL OR HEALTH SYSTEM OTHER THAN WELLSTAR HEALTH SYSTEM OR ITS AFFILIATES? FOR EXAMPLE, PROVIDER HAS A SERVICE ARRANGEMENT/AGREEMENT WHERE YOU PROVIDE MEDICAL SERVICES AT A COMPETING HOSPITAL. ☐ YES | If yes, please explain each arrangement and identify the other party _____ ☐ NO

DOES THE PROVIDER SERVE AS AN EMPLOYEE, INDEPENDENT CONTRACTOR, TRUSTEE, DIRECTOR, PARTNER, GENERAL MANAGER, OFFICER, AGENCT, A DVISOR IN ANY OTHER SIMILAR LEADERSHIP/GOVERNANCE ROLE OR CAPACITY (OTHER THAN AS A MEDICAL STAFF LEADER) WITH ANY HEALTHCARE PROVIDER, SYSTEM, NETWORK, HEALTH PLAN, INSURER OR OTHER ORGANIZATION WHICH IS OR MAY BE A COMPETITOR OF WELLSTAR HEALTH SYSTEM O R ITS SUBSIDIARIES OR AFFILIATES? FOR EXAMPLE, AN EMPOYEE/DIRECTOR RELATIONSHIP AT A COMPETING HOSPITAL. ☐ YES | If yes, for each such relationship, please identify the entity and describe the role played by the member of your group_____ ☐ NO

HAS THE PROVIDER EVER BEEN SUSPENDED OR EXCLUDED FROM PARTICIPATON IN A FEDERAL OR STATE GOVERNMENTAL HEALTHCARE PROGRAM IN THE LA ST FIVE (5) YEARS? ☐ YES | if yes, please provide specific information regarding such suspension or exclusion ☐ NO

Provider Last Name:	Provider First Name:	Provider Middle Name:
Provider NPI:	Primary Specialty:	Secondary Specialty:

EXISTING PROVIDER LEAVING PRACTICE (TERM REQUEST)

ACO PROVIDERS, PLEASE EMAIL A SIGNED TERM LETTER TO provider.relations@wellstar.org

Provider Last Name:	Provider First Name:	Provider Middle Name:
Provider NPI:	REASON FOR TERM: ☐ Leaving Service Area/Relocation ☐ Joining Another Practice ☐ Retiring ☐ Deceased ☐ OTHER: _____	

PLEASE CONFIRM AND NOTE THE REQUESTED EFFECTIVE DATE OF TERMINATION_____/_____/_____

AUTHORIZED SIGNATURE

Person Authorized to Make Changes (Print Name & Title):	Signature:	Email:	Date:

Please complete one form for EACH provider in the practice. Once completed, please email to provider.relations@wellstar.org or wellstarclinicalpart@wellstar.org. To fax, please send to (770) 563-0736.

Please use this Provider Demographic Data Change Form to submit all changes.
Once completed, please email to provider.relations@Wellstar.org or Wellstarclincalpart@Wellstar.org.
To fax, please send to (770) 999-2387.

Wellstar
Clinical Partners

PROVIDER DEMOGRAPHIC DATA CHANGE FORM

Practice Name:

PLEASE SELECT YOUR APPROPRIATE WELLSTAR AFFILIATION(S)

☐ WellStar Medical Group (WMG)	☐ WellStar Clinical Partners (WCP)	☐ Accountable Care Organization (ACO)	☐ WellStar Employee Plan ONLY

Provider type: ☐ MD ☐ DO ☐ DPM ☐ Other: _____

PRACTICE DEMOGRAPHIC CHANGE ONLY

Please include updated practice W9s for any respective changes and send along with completed form

Previous Practice Name:	New Practice Name:
Previous Practice TIN:	New Practice TIN:
Practice Billing Address:	
Previous Practice Address:	New Practice Address:
Changes to Phone, Fax, or Email:	

PROVIDER DEMOGRAPHIC CHANGE ONLY

Please include updated provider W9s for any respective changes and send along with completed form

Provider Previous Last Name:	Provider Previous First Name:	Provider Previous Middle Name:
Provider New Last Name:	Provider New First Name:	Provider New Middle Name:
Previous Provider NPI:	New Provider NPI:	
Changes to Phone, Fax, or Email:		

NEW PROVIDER JOINING PRACTICE

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HAS A WELLSTAR MANAGED CARE CREDENTIALING APPLICATION BEEN COMPLETED FOR THIS PROVIDER?

☐ YES | Please provide date of submission or effective date of committee approval _____/_____/_____

☐ NO

IS THE PROVIDER BOARD CERTIFIED?

☐ YES | Please provide date of certification ____/_____/_____ and expiration date ____/_____/_____
| Please indicate the certifying body _____

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Wellstar
HEALTH SYSTEM