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1568533065



1568533065 NPI Number Info

Status: Active (Since 11/13/2006)

STEVEN M NISHI M.D.



API



PNG



TXT



PDF



XML



JSON

(http://www.hipaaspace.com/medical_billing/coding/billing_code_lookup_services.aspx)

NPI Number	1568533065	Similar Providers
Entity Type	Individual	
Provider Name	STEVEN M NISHI M.D.	
Provider Mailing Address	<input type="button" value="Copy Mailing Address"/>	
First Line	915 N KING ST	
Second Line		
City	HONOLULU	
State	HI	
Postal Code	96817-4544	
Country	US	
Phone	808-848-1438 (tel:808-848-1438)	
Fax	808-841-7270	
Provider Practice Location	<input type="button" value="Copy Practice Location"/>	
First Line	915 N KING ST	
Second Line		
City	HONOLULU	
State	HI	
Postal Code	96817-4544	
Country	US	
Phone	808-848-1438 (tel:808-848-1438)	
Fax	808-841-7270	
Authorized Official		
Title or Position		
Name		
Credential		
Telephone Number		
Provider Enumeration Date	11/13/2006	
Last Updated	03/07/2014	

Is it your NPI number ?

[Edit](http://www.npivalidator.com/UpdateProfile.aspx?NPI=1568533065&Action=Edit)

[Delete](http://www.npivalidator.com/UpdateProfile.aspx?NPI=1568533065&Action=Delete)

Detailed Information

NPI Number **1568533065** has the "**Individual**" type of ownership and has been registered to the following primary business legal name (which is a provider name or healthcare organization name) — **STEVEN M NISHI M.D.**. Records indicate that the provider gender is "**Male**". The enumeration date of this NPI Number is **11/13/2006**. NPI Number information was last updated on **03/07/2014**.

The provider is physically located (Business Practice Location) at:

915 N KING ST
HONOLULU, HI
96817-4544, US

STEVEN M NISHI M.D. can be reached at his practice location using the following numbers:

Phone: ☎ **808-848-1438 (tel:808-848-1438)**
Fax: 📠 **808-841-7270**

The provider's official mailing address is:

915 N KING ST
HONOLULU, HI
96817-4544, US

The contact numbers associated with the mailing address are:

Phone: ☎ **808-848-1438 (tel:808-848-1438)**
Fax: 📠 **808-841-7270**

Scope of Practice

The following information about the specialty of the provider is available:

#	Taxonomy Code	Taxonomy Specialty
1	207V00000X (http://www.hipaaspace.com/medical_billing/coding/healthcare.provider.taxonomy.code.set/207V00000X)	Obstetrics & Gynecology (http://www.hipaaspace.com/medical_billing/coding/healthcare.pro)

Legacy (Non-NPI) Identifiers

For crosswalk purposes, the following (non-NPI) identifiers are available for this provider:

#	Provider Identifier	Identifier Type	Identifier State	Issuer
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Legacy & Proprietary Identifiers Ever Reported To NPPES

Collection of legacy and proprietary (non NPI) identifiers ever reported for this provider:

#	Provider Identifier	Identifier Type	Identifier State	Issuer
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Reference NPI Information. Full replica of the CMS (NPPES) NPI record

Field Name	Value
NPI	1568533065

Field Name	Value
	10-position all-numeric identification number assigned by the NPS to uniquely identify a health care provider.
Entity Type	Individual Code describing the type of health care provider that is being assigned an NPI. Codes are: <ul style="list-style-type: none"> 1 = (Person): individual human being who furnishes health care; 2 = (Non-person): entity other than an individual human being that furnishes health care (for example, hospital, SNF, hospital subunit, pharmacy, or HMO).
Is Sole Proprietor	N Indicate whether provider is a sole proprietor. <ul style="list-style-type: none"> A sole proprietor is the sole (the only) owner of a business that is not incorporated; that unincorporated business is a sole proprietorship. In a sole proprietorship, the sole proprietor owns all of the assets of the business and is solely liable for all of the debts of the business. There is no difference between a sole proprietorship and a sole proprietor; they are legally a single entity: an individual. In terms of NPI assignment, a sole proprietor is an Entity type 1 (Individual) and is eligible for only one NPI (the sole proprietorship business is not eligible for its own NPI). As an individual, a sole proprietorship cannot be a subpart and cannot have subparts. (See NPI Final Rule for information about subparts.) A sole proprietorship may or may not have employees. Often, the IRS assigns an EIN to a sole proprietorship in order to protect the sole proprietor's SSN from disclosure in claims or on W-2s. NPPES does not capture a sole proprietorship's EIN. Many types of health care providers could be sole proprietorships (for example, group practices, pharmacies, home health agencies).
Provider Last Name (Legal Name)	NISHI The last name of the provider (if an individual). If the provider is an individual, this is the legal name. This name must match the name on file with the Social Security Administration (SSA). In addition, the date of birth must match that on file with SSA. (First and last names are required for initial applications.) The First, Middle, Last and Credential(s) fields allow the following special characters: ampersand, apostrophe, colon, comma, forward slash, hyphen, left and right parentheses, period, pound sign, quotation mark, and semi-colon. A field cannot contain all special characters.
Provider First Name	STEVEN The first name of the provider, if the provider is an individual.
Provider Middle Name	M The middle name of the provider, if the provider is an individual.
Provider Name Prefix Text	DR. The name prefix or salutation of the provider if the provider is an individual; for example, Mr., Mrs., or Corporal.
Provider Credential Text	M.D. The abbreviations for professional degrees or credentials used or held by the provider, if the provider is an individual. Examples are MD, DDS, CSW, CNA, AA, NP, RNA, or PSY. These credential designations will not be verified by NPS.
Provider First Line Business Mailing Address	915 N KING ST The first line mailing address of the provider being identified. This data element may contain the same information as "Provider first line location address".
Provider Business Mailing Address City Name	HONOLULU The City name in the mailing address of the provider being identified. This data element may contain the same information as "Provider location address City name".
Provider Business Mailing Address State Name	HI The State or Province name in the mailing address of the provider being identified. This data element may contain the same information as "Provider location address State name".
Provider Business Mailing Address Postal Code	96817-4544 The postal ZIP or zone code in the mailing address of the provider being identified. NOTE: ZIP code plus 4-digit extension, if available. This data element may contain the same information as "Provider location address postal code".
Provider Business Mailing Address Country Code	US The country code in the mailing address of the provider being identified. This data element may contain the same information as "Provider location address country code".
Provider Business Mailing Address	808-848-1438

Field Name	Value
Telephone Number	The telephone number associated with mailing address of the provider being identified. This data element may contain the same information as "Provider location address telephone number".
Provider Business Mailing Address Fax Number	808-841-7270 The fax number associated with the mailing address of the provider being identified. This data element may contain the same information as "Provider location address fax number".
Provider First Line Business Practice Location Address	915 N KING ST The first line location address of the provider being identified. For providers with more than one physical location, this is the primary location. This address cannot include a Post Office box.
Provider Business Practice Location Address City Name	HONOLULU The city name in the location address of the provider being identified.
Provider Business Practice Location Address State Name	HI The State or Province name in the location address of the provider being identified.
Provider Business Practice Location Address Postal Code	96817-4544 The postal ZIP or zone code in the location address of the provider being identified. NOTE: ZIP code plus 4-digit extension, if available.
Provider Business Practice Location Address Country Code	US The country code in the location address of the provider being identified.
Provider Business Practice Location Address Telephone Number	808-848-1438 The telephone number associated with the location address of the provider being identified.
Provider Business Practice Location Address Fax Number	808-841-7270 The fax number associated with the location address of the provider being identified.
Provider Enumeration Date	11/13/2006 The date the provider was assigned a unique identifier (assigned an NPI).
Last Update Date	03/07/2014 The date that a record was last updated or changed.
Provider Gender Code	M The code designating the provider's gender if the provider is a person.
Provider Gender	Male The provider's gender if the provider is a person.
Healthcare Provider Taxonomy Code #1	207V00000X The Health Care Provider Taxonomy code is a unique alphanumeric code, ten characters in length. The code set is structured into three distinct "Levels" including Provider Type, Classification, and Area of Specialization.
Healthcare	Obstetrics & Gynecology

Field Name	Value
Provider Taxonomy 1	Healthcare Provider Taxonomy #1
Provider License Number 1	MD-8971 Certain taxonomy selections will require you to enter your license number and the state where the license was issued. Select Foreign Country in the state drop down box if the license was issued outside of United States. The License Number field allows the following special characters: ampersand, apostrophe, colon, comma, forward slash, hyphen, left and right parentheses, period, pound sign, quotation mark, and semi-colon. A field cannot contain all special characters. DO NOT report the Social Security Number (SSN), IRS Individual Taxpayer Identification Number (ITIN) in this section.
Provider License Number State Code 1	HI Provider License Number State Code #1
Healthcare Provider Primary Taxonomy Switch 1	Y Primary Taxonomy: <ul style="list-style-type: none"> • X - The primary taxonomy switch is Not Answered; • Y - The taxonomy is the primary taxonomy (there can be only one per NPI record); • N - The taxonomy is not the primary taxonomy.

Directions to "STEVEN M NISHI M.D." Practice Location

Yours Location (Starting point)

Practice Location (Destination)

My Location

915 N KING ST HONOLULU, HI, 96817-4544

Get Direction



www.HIPAASpace.com privacy policies explain how we treat your personal data and protect your privacy when you use our Services. By using our Services, you agree that www.HIPAASpace.com can use such data in accordance with our privacy policies.

We respond to notices of alleged copyright infringement and terminate accounts of repeat infringers according to the process set out in the U.S. Digital Millennium Copyright Act.

We provide information to help copyright holders manage their intellectual property online. If you think somebody is violating your copyrights and want to notify us, you can find information about submitting notices and www.HIPAASpace.com policy about responding to notices in our Help Center.