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2017 1St Ave, Ste 301 Ste 301 San Diego, CA 92101

(888) 743-7526

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Roberts, James, MD 3





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Roberts, James, MD





4033 3Rd Ave, Ste 400 Ste 400 San Diego, CA 92103

(619) 299-0670

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(619) 299-0670

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View Details



Roberts, James, MD





230 Prospect Pl, Ste 210 Ste 210 Coronado, CA 92118

(619) 299-0670

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View Details



Roberts, James, MD





4305 University Ave, Ste 350 Ste 350 San Diego, CA 92105

(888) 743-7526

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Roberts, James, MD



7526 Clairemont Mesa Blvd San Diego, CA 92111

(888) 743-7526

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Roberts, James, MD





3444 Kearny Villa Rd, Ste 202 Ste 202 San Diego, CA 92123

(858) 429-7646

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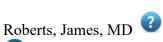


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4501 Mission Bay Dr, Ste 1C Ste 1C San Diego, CA 92109

(888) 743-7526

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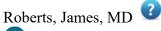
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4575 College Ave San Diego, CA 92115

(888) 743-7526

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Roberts, James, MD

220 Euclid Ave, Ste 30 Ste 30 San Diego, CA 92114

(888) 743-7526

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(888) 743-7526

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Roberts, James, MD 3





10737 Camino Ruiz, Medical Mall 220 Medical Mall 220 San Diego, CA 92126

(888) 743-7526

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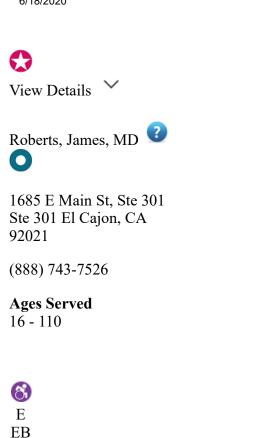
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Urology 3

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DIRECTORY OF INFORMATION

HOSPITAL AFFILIATION

These are hospitals where this physician has privileges (where he/she has the hospital's permission to utilize the facility to care for his/her patients). The information is self reported and limited by the matching criteria used for credentialing/recredentialing. The health plan validates this information when the practitioner notifies the health plan of any changes or every three years.

MEDICAL GROUP AFFILIATION

These are medical groups of which this physician has a working relationship or association with. These groups are generally of the same or similar practice specialties. The information is self reported and limited by the matching criteria used for credentialing/recredentialing. The health plan validates this information when the practitioner notifies the health plan of any changes or every three years.

PROVIDER / OFFICE GROUP NAME

These are medical groups of which this physician has a working relationship or association with. These groups are generally of the same or similar practice specialties. The information is self reported and limited by the matching criteria used for credentialing/recredentialing. The health plan validates this information when the practitioner notifies the health plan of any changes or every three years.

PROVIDER AFFILIATION

These are physicians which have a working relationship or association with one another. These groups are generally of the same or similar practice specialties. The information is self reported and limited by the matching criteria used for credentialing/recredentialing. The health plan validates this information when the practitioner notifies the health plan of any changes or every three years.

PROVIDER NAME

The provider, group or hospital name is self reported and limited by the matching criteria used for credentialing/recredentialing, no less than every three years and/or when the health plan is notified of any changes.

PROVIDER LOCATION

The provider or hospital location(s) is self reported and limited by the matching criteria used for credentialing/recredentialing, no less than every three years and/or when the health plan is notified of any changes.

GENDER