



**Michael R Oreskouich MD**

General and Addiction Psychiatrist

November 28, 2021

Greta Jibbensmith, JD  
11300 Roosevelt Way NE  
Suite 300  
Seattle WA, 98125

*Goodnight v. Ralidak King County Cause No. 20-3-03830-3 SEA*

Dear Ms. Jibbersmith,

Per your request, I am providing this letter to summarize my findings and opinions on the above referenced matter. I have no past or ongoing relationship with Ms. Goodnight and I am not acting in the capacity of a treating professional. This report may contain psychological findings that could be misunderstood or misconstrued by Ms. Goodnight. If Ms. Goodnight is provided a copy of this report, it is recommended that she consult with a professional who can explain the data and conclusions.

The findings and opinions that follow are based, in part, on my education, training, experience, and expertise in the field of psychiatry and addiction psychiatry and on the materials specific to this case provided to me so far. These opinions are held on a more probable than not basis.

In preparation for this report, I reviewed 210 documents including Character Witness statements, Pleadings, Medical documents, Parenting evaluations, Police reports and Orders. I interviewed Ms. Goodnight, Mr. Ralidak, Monica Bonita MSW who is Ms. Goodnight's mental healthcare provider, and Larisa Ignacio who is Ms. Goodnight's landlady. In addition, I reviewed 10 additional character witness statements. I conducted the interview using the Structured Clinical Interview for DSM-5 Disorders and reviewed all toxicology reports.

The standard for the diagnosis of all mental disorders is the Diagnostic and Statistical Manual of Mental Disorders Fifth Edition ("DSM-5") of the American Psychiatric Association.

The diagnoses are made using the Structured Clinical Interview for DSM-5 Disorders ("SCID 5"). This interview covers all possible diagnoses including ADHD, Schizophrenia, Other Psychotic Disorders, Bipolar Disorders, Depressive Disorders, Anxiety Disorders, Obsessive Compulsive Disorders, Trauma and Stress Related Disorders, Dissociative Disorders, Somatic Related Disorders, Eating Disorders, Sleep Disorders, Sexual Dysfunction, Impulse Control Disorders, Substance Disorders, Neurocognitive Disorders, Personality Disorders, and Paraphilic Disorders. This interview was conducted over a period of 3 hours. In addition, corroborative information was obtained from collateral sources including Ms. Bonita, Mr. Ralidak, Ms. Ignacio and the existing 210 documents.

Veronika Goodnight is not impaired from any psychiatric, mental, behavioral or substance use disorder that would affect her ability to parent her children with reasonable skill and safety. There is no reason to preclude her having sole custody of her children.

Ms. Goodnight has been diagnosed in the past with Premenstrual Dysphoric Disorder and Post Traumatic Stress Disorder for which she has sought therapy. However, the symptoms of both of these disorders are not currently associated with clinically significant distress or interference with work, school, usual social activities, or relationships with others which is required to make the diagnosis. She has continued in psychotherapy with Monica Gonzales MSW at Sea Mar Community Health Center and there is no basis for further treatment with medications or other forms of therapy. She should continue her therapy with Ms. Gonzales until Ms. Gonzales no longer believes that it is necessary.

There has been an allegation regarding the safety of the children stating Ms. Goodnight has suffered from a substance use disorder over the last several years and is currently using alcohol and drugs of various varieties. However, toxicological assessment on November 4, 2020 included a hair ethyl glucuronide test that was negative. Ethyl glucuronide is a byproduct of alcohol which becomes deposited in the hair and provides a longitudinal time marker for the consumption of alcohol. For example, hair grows one centimeter per month so a sample of 3 inches of hair that is negative would mean there has been no alcohol consumption over the previous 6 months. A Federal Department of Transportation drug screen was negative on December 17, 2000. An eleven-panel drug test was negative on November 10, 2020. There is no evidence that Ms. Goodnight has failed to fulfill major role obligations at work, school or home and there is no evidence of alcohol consumption in hazardous situations. Likewise, there is no evidence of social, occupational, or recreational activities being given up or reduced because of alcohol consumption. There has never been a DUI. The collection of this data supports the conclusion that a substance use disorder does not exist and does not affect the ability to safely parent her children.

During my evaluation of Ms. Goodnight and interviews with Mr. Ralidak, Ms. Gonzales, and review of 10 collateral sources it became apparent that Ms. Goodnight loves and cherishes her three children. This is manifested in several ways including behavioral management, education, nutrition, socialization, and nurturance. The entire home has been arranged to affect healthy psychological growth of the three children. An online tour of the home included sleeping arrangements, toys, education materials, nutrition and much about Ms. Goodnight's approach to raising her children.

Much has been made of the past history of the Ms. Goodnight especially with respect to traumatic events in her past life. The nature of these traumatic events has been said to signify that Ms. Goodnight remains traumatized and as such is not capable of continuing to parent her three children. It has been said that she continues to suffer from Post-Traumatic Stress Disorder. That is not the case. Ms. Goodnight has certainly experienced major traumatic events during her earlier life. At age 16 she left her home because of verbal, emotional, and physical trauma from her father. At age 17, her boyfriend attempted to overdose her. She sustained cardiac arrest but was successfully resuscitated. At age 17, she was diagnosed as having borderline personality disorder and was started on medication which she took for four years. She does not know the exact medication but believes it was a combination of various mood stabilizers and antidepressants. From age 18 to 21 she did experiment with methamphetamine and ecstasy but did not continue after age 21. At age 22 she was diagnosed as having bipolar disorder and received courses of six different medication's which did help stabilize her mood but there were significant side effects and she discontinued the medication after three years. She has not been on any psychotropic medication since age 24. At age 24, she became concerned about her alcohol consumption and became abstinent through a 12-step program and her religious beliefs.

Ms. Goodnight has done group therapy for codependency and has attended Al-Anon. She has studied and has become committed to "radical acceptance" (things being exactly where they are at this time regardless of how she thinks or feels about her situation). At age 30 she was baptized in the Mormon church and believes that the practices of Mormonism have been very helpful to her. She currently practices meditation, yoga and is deeply involved with her support system within her community in Carnation.

Ms. Goodnight's traumatic past has been used to contend that because of these events she lacks the ability to currently have primary custody of her children and that primary custody should be granted to the children's father. There is absolutely no foundation for such an opinion. In fact, her recovery from those events speaks to her resiliency and strength.

In conclusion, I declare under the penalty of perjury that everything that I have declared in this document is true and correct to the best of my knowledge.

Respectfully,

A handwritten signature in black ink, appearing to read 'M. Oreskovich', with a stylized flourish at the end.

*Mike Oreskovich*

Michael R. Oreskovich MD

Board Certified General and Addiction Psychiatrist