

**Superior Court of Washington, County of King**

In re:

Petitioner/s *(person/s who started this case)*:

Veronika Goodnight

And Respondent/s *(other party/parties)*:

Mathew Ralidak

No. 20-3-03830-3 SEA

Sealed Personal Health Care Records  
(Cover Sheet)

(SEALPHC)

☒ Clerk's action required.

*For use in Family Law and Guardianship cases.*

**Sealed Personal Health Care Records  
(Cover Sheet)**

**Use this form** as a cover sheet to keep your personal health information **private** from the public. On the first page of each document, write the word "SEALED" 1 inch from the top of the page.

Check the documents you are attaching to this cover sheet to be sealed:

Health records of any kind (including correspondence) related to a person's physical or mental condition, or payment for health care.

Submitted by: Petitioner or lawyer

► Elizabeth Stowe  
Sign here

Elizabeth Stowe WSBA 60591

Print name (if lawyer, also provide WSBA #)

**Important!** The other person and the lawyers in your case can see your **sealed** documents. If you need to keep your address information private for safety reasons, you may cross out or delete your address information.



## Snohomish Valley Holistic Medicine

June 18, 2025

RE: Veronika Goodnight, DOB: 2/15/1982

To Whom It May Concern:

I am writing again in support of Veronika's request for sole medical decision making for her children, Elora, Aidan, and Raina Goodnight-Ralidak. Over the past year, despite having joint medical decision making specified in the parenting plan, Veronika has been excluded from visits with other healthcare providers regarding her children. On April 7, 2025, Veronika had been notified by Mathew of an appointment he made for Elora at EvergreenHealth on 4/10/25, where the children had established care last year while staying with their dad. Veronika reached out to me as the Primary Care Provider her children have been seeing for several years and notified Mathew that she would prefer to have Elora be seen by me, if possible, due to my established relationship (at the time the appointment at EvergreenHealth was with a provider who had never seen Elora) and historical knowledge of Elora's complaints of tonsil and stomach issues. Despite my offering availability on the same day as the appointment scheduled at EvergreenHealth, Mathew opted to take Elora to EvergreenHealth on 4/9/25 instead, where Elora did end up being seen by the ARNP she had established care with there. Veronika was not given any say in the decision of where Elora should go despite communicating with Mathew that her preference was for Elora to see me. In order to ensure continuity of care, I did provide historical records of the health issues for Elora to the EvergreenHealth provider and after reviewing the treatment plan given by that provider, I reassured Veronika that in my medical opinion, the plan was reasonable and not too different from what I would have recommended.

One of the recommendations was for Elora to see an allergy specialist for testing due to the persistence of enlarged tonsils. On April 10, 2025, Veronika notified me that she had scheduled an appointment with an asthma and allergy specialist to whom Elora had been referred and just 2 days later, she learned that Mathew had canceled the appointment. This is another example of Mathew excluding Veronika from the medical decision-making process that she and Mathew agreed upon in the parenting plan. While I do not have any concerns about the medical care Elora and her siblings are receiving, I am concerned about the rights of Veronika being violated as she has been excluded from the medical decision making process as well as the impact her exclusion from these decisions and doctor's appointments may have on the relationship with her children. In the past, Mathew has reached out to me and sought care or medical advice for his children, which is what makes the recent decision to take Elora to the provider of his choice despite my having availability in the same week seem out of the ordinary.

Finally, on 4/27/25 and 6/2/25, Veronika received notifications from the pharmacy about medications prescribed for her children that had not been picked up. She reached out to me to find out if I had seen the children and I was able to confirm that I had not seen the children nor prescribed the medications. I also verified that the prescriptions were ordered by urgent care providers after accessing the prescription history on each occasion. Veronika was understandably concerned that she had not been informed of the medical care her children had received as well as that the prescribed treatments may not have been administered as ordered. I did explain that it was possible the prescriptions had been sent to a different pharmacy and picked up; however, both the need for medical care and the treatment plans should have been communicated to her per the parenting plan and clearly, there had been no communication aside from the pharmacy texts. This is yet another example of Veronika's parental rights being violated.

I sincerely hope that the court will consider what is best for the children and allow their mother, who prior to her separation and divorce from Mathew, was always the one to schedule appointments and discuss health concerns and treatment plans with me as the Primary Care Provider, resume that role as a parent and be given the opportunity to re-build a healthy relationship with her children.

I declare, under penalty of perjury under the laws of the State of Washington, that the statement made above is true and correct to the best of my knowledge.

Sincerely,

Signed on 6/18/2025 in King County, WA

Stacy Bowker, ND

WA License # NT00001309



## *Snohomish Valley Holistic Medicine*

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May 22, 2024

To Whom It May Concern:

RE: Veronika Goodnight, DOB: 2/15/1982

I am writing this letter to support Veronika Goodnight in her request to be granted full medical decision-making authority for her children, Elora, Aidan and Raina Ralidak. I have known Veronica for over 5 years since she established care with me as a primary care provider for herself and her children in November 2018.

Veronika has consistently demonstrated responsibility and attentiveness in managing her children's healthcare needs. She has been the primary parent who schedules medical appointments, seeks medical advice, and communicates and coordinates care plans with their father, Mathew Ralidak, as well as others involved in their care. She is quick to seek clarification from me for treatment her children have received outside of my office and has been diligent in following through with my recommendations as well as the recommendations of other doctors or healthcare professionals involved in her children's care. Here are some examples that illustrate why I believe Veronika should have full medical decision-making authority:

The last time I saw all three children with both parents present was October of 2022. At this appointment, there was a recommendation to follow up after 6 weeks due to concerns about one of the children's exam findings. The follow-up appointment for November 2022 was scheduled immediately after the appointments in October; however, Veronika was the one to bring the children back for follow-up. Notes were provided to Mathew as he claimed he did not know about the appointment. Additionally, there were concerns that part of the treatment plan pertaining to dietary elimination of dairy, dyes, and restriction of sugar, was not being adhered to while the children were with Mathew.

In June of 2023, antibiotics were prescribed for Elora and Aidan due to Elora having symptoms along with a positive strep test with instructions to treat Aidan, should he develop symptoms given his history of Scarlet fever caused by Strep earlier that year. Veronika contacted me after the children returned from Mathew's house needing a new prescription for Aidan since the antibiotics had been left at their dad's. She was additionally concerned because Aidan reported to her at the time that he had not been given the medication as prescribed, despite having very enlarged and red tonsils (one of the symptoms I told Veronika to watch for and treat—an instruction that was communicated to Mathew as well).



## *Snohomish Valley Holistic Medicine*

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Earlier this month, Raina was having urinary tract symptoms while at school and Mathew reached out to me for advice. Due to it being the weekend, I recommended she be seen at an Urgent Care or Walk-In clinic. Veronika contacted me the following Monday after picking up her children from school and learning from the school nurse that Raina's medication was at the school. Veronika had been told about Raina's symptoms by the school nurse, but was never told by Mathew that Raina was seen and prescribed an antibiotic by urgent care. I was able to retrieve the prescription information and instructions and informed Veronika that Raina would need to continue the medication as prescribed. The lack of communication from Mathew about this important health information was concerning to me, especially given the fact that the Urgent Care had not sent me notes, so I had no idea until Veronika reached out to me that Raina had even been seen.

Finally, Veronika has voiced concerns to me about the need for her children to receive professional counseling. This has been recommended by teachers at the school as well; however, Veronika has not been able to proceed with this recommendation as it requires consent and coordination with Mathew. Elora did recently begin therapy after having an assessment at Dawson's Place due to a molestation incident earlier this year, which was documented in a police report. The first time Mathew was contacted to schedule the therapy, he declined to schedule. Fortunately, Elora's advocate reached out to Veronika who was then able to make sure Elora was scheduled for the therapy she needs.

Veronika is frustrated that her hands are somewhat tied when it comes to making important health related decisions for her children and believes it would be better for all involved if she had full medical decision-making authority. Based on my experience, I recommend to the court that this request is granted, as it will allow Veronika to act expeditiously in the best interests of the children. She has always been consistent in her communication both to me and to their father and will continue to ensure that Mathew is included in all communications of treatment plans and healthcare related appointments.

I declare, under penalty of perjury under the laws of the State of Washington, that the statement made above is true and correct to the best of my knowledge.

Sincerely,

Signed on 5/22/24 in King County, WA

Stacy Bowker, ND

License # NT00001309, WA



**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