



Autonomous Reaming for Total Hip Replacement

Fall Validation Demonstration

November 30, 2022

Team C



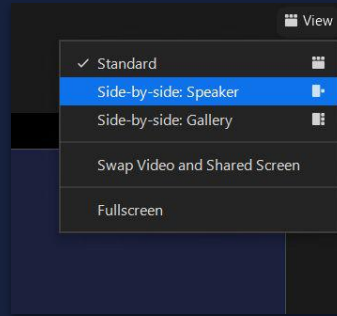


November 21, 2022



Zoom Viewers please **mute your microphone and **turn off your video**! Thank you!**

Recommended Zoom Settings:



Zoom Viewing Info:

- Presentation Cam - screenshare of slide presentation
- System Cam - video which highlights system





Autonomous Reaming for Total Hip Replacement

Fall Validation Demonstration

November 30, 2022

Team C





The Team



Kaushik Balasundar

Perception and
Sensing Lead



Parker Hill

Mechanical
Systems
Engineering Lead



Anthony Kyu

Controls and
Actuation Lead



Gunjan Sethi

Software
Engineering Lead



Sundaram Seivur

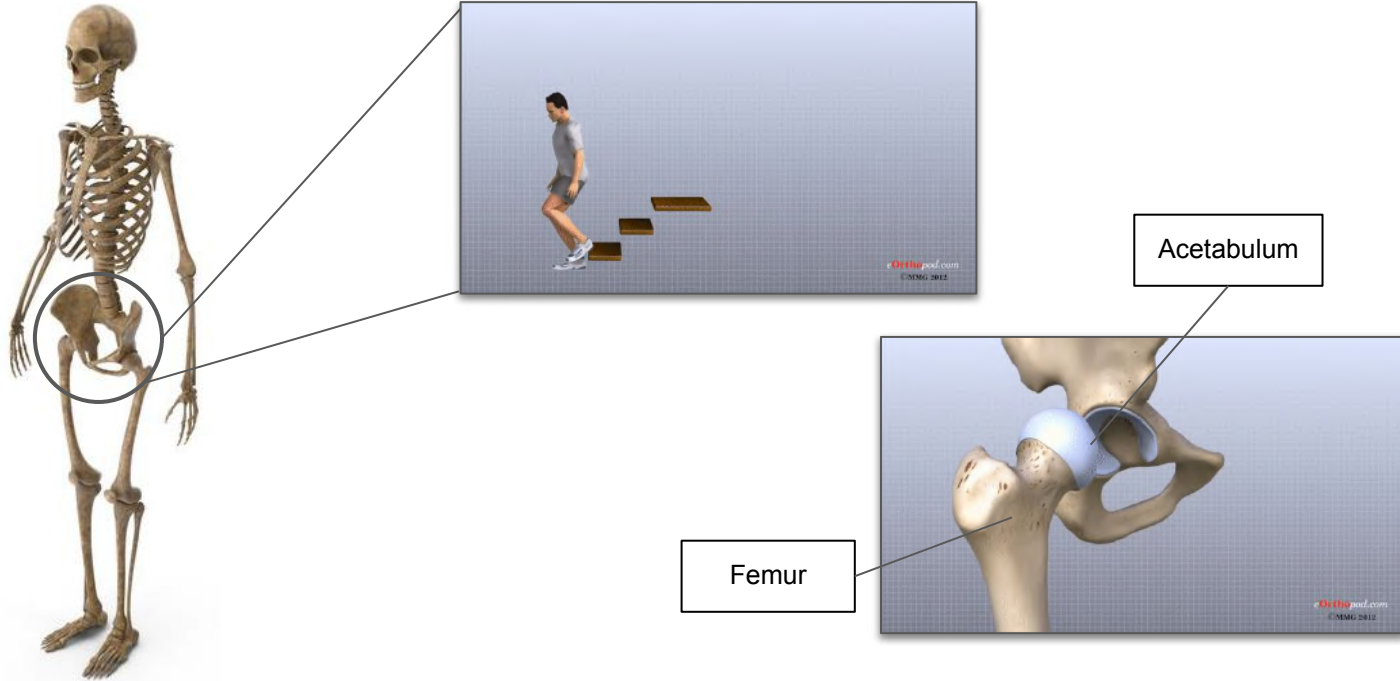
System Validation
Lead

Total Hip Replacement

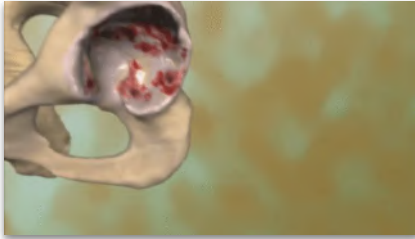
"You have been diagnosed with **arthritis** in your hip. You need **hip replacement surgery!**"



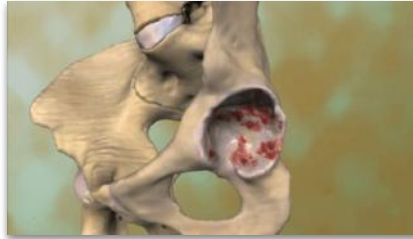
Total Hip Replacement



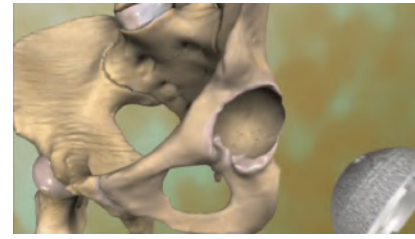
Total Hip Replacement



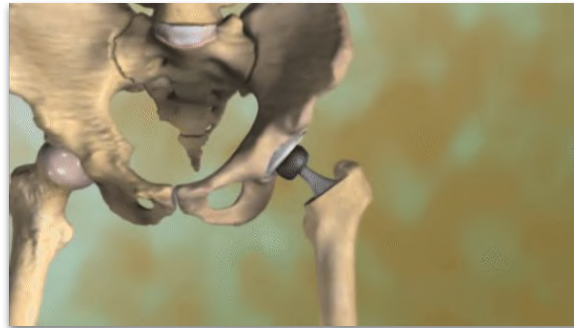
Bone within acetabulum is damaged and must be removed



A reamer is used to remove bad bone

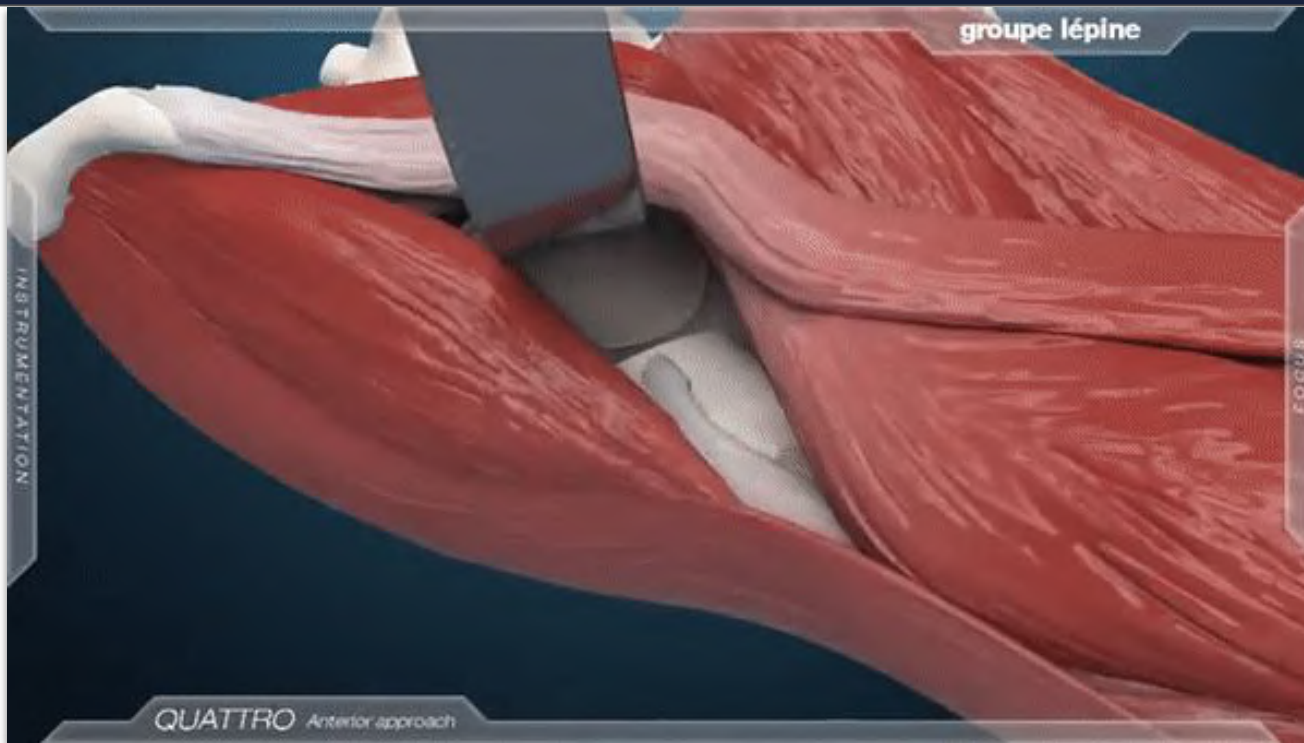


Acetabular implant is fitted



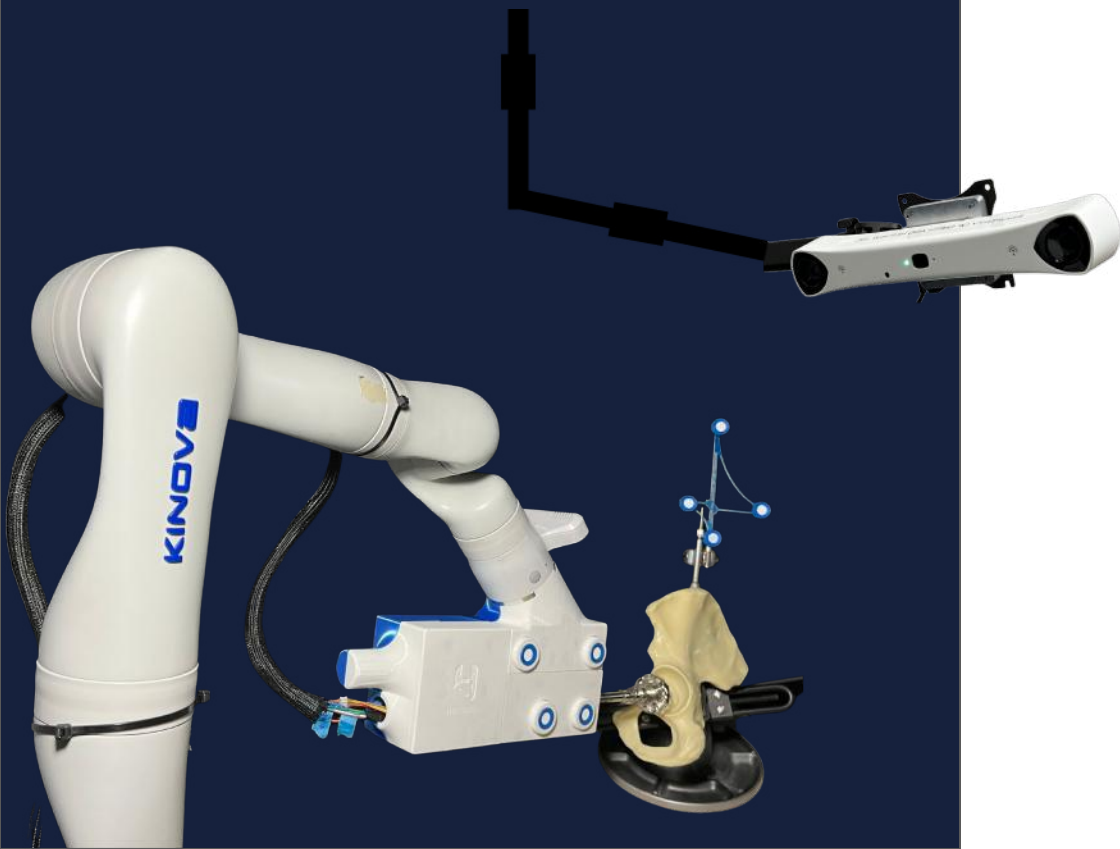
Femur implant fitted, surgery complete!

Total Hip Replacement



But surgeons can hardly see the acetabulum and a lot of forces are involved in reaming!

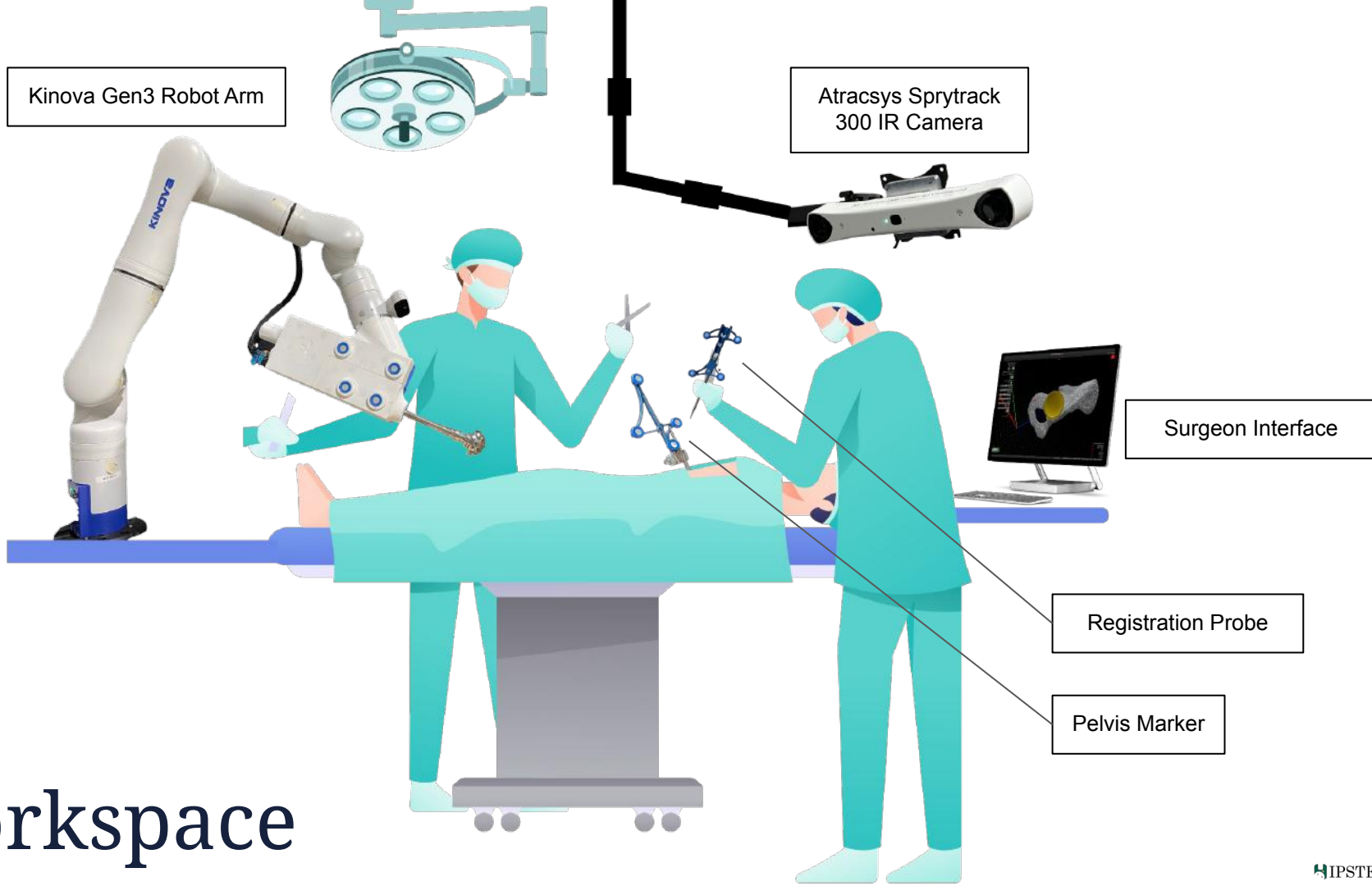
Our Solution



A fully **autonomous** robotic arm aimed at performing acetabular reaming with **high accuracy**, eliminating the need of surgeons to use intuition to correctly position/angle the reamer.

Kinova Gen3 Robot Arm

Atracsys Sprytrack
300 IR Camera



Surgeon Interface

Registration Probe

Pelvis Marker

Workspace



Ballistics gel
simulates how bone
moves within soft
tissue

Why is the pelvis in that? Why are there sandbags?

We want to replicate pelvis motion
within a human body as accurately
as possible!

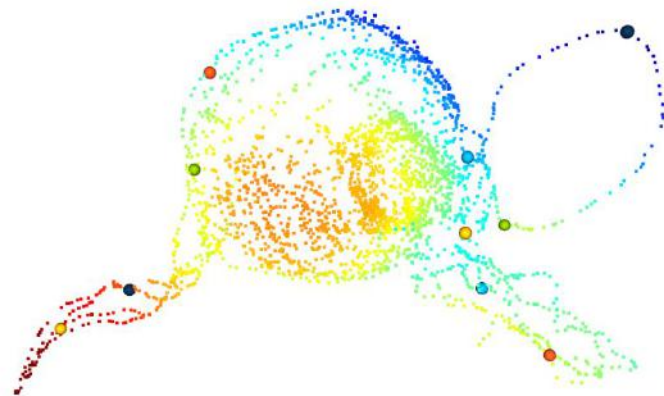


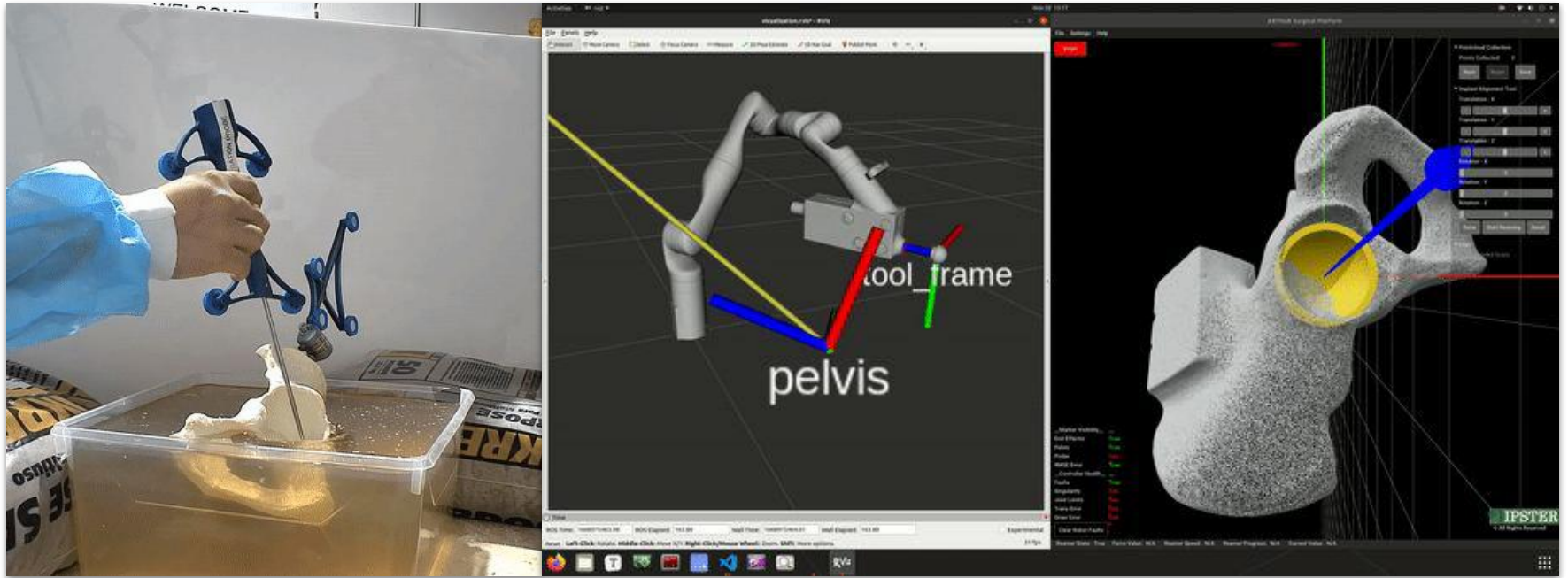
Sandbags simulate
how the patient body
moves during surgery

Pointcloud Collection



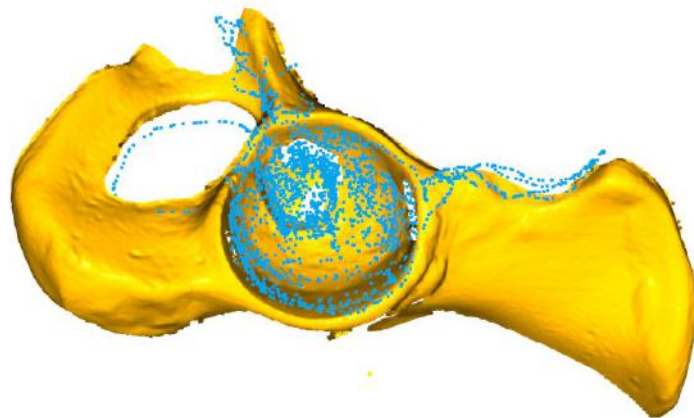
*registration probe
(for pointcloud collection)*

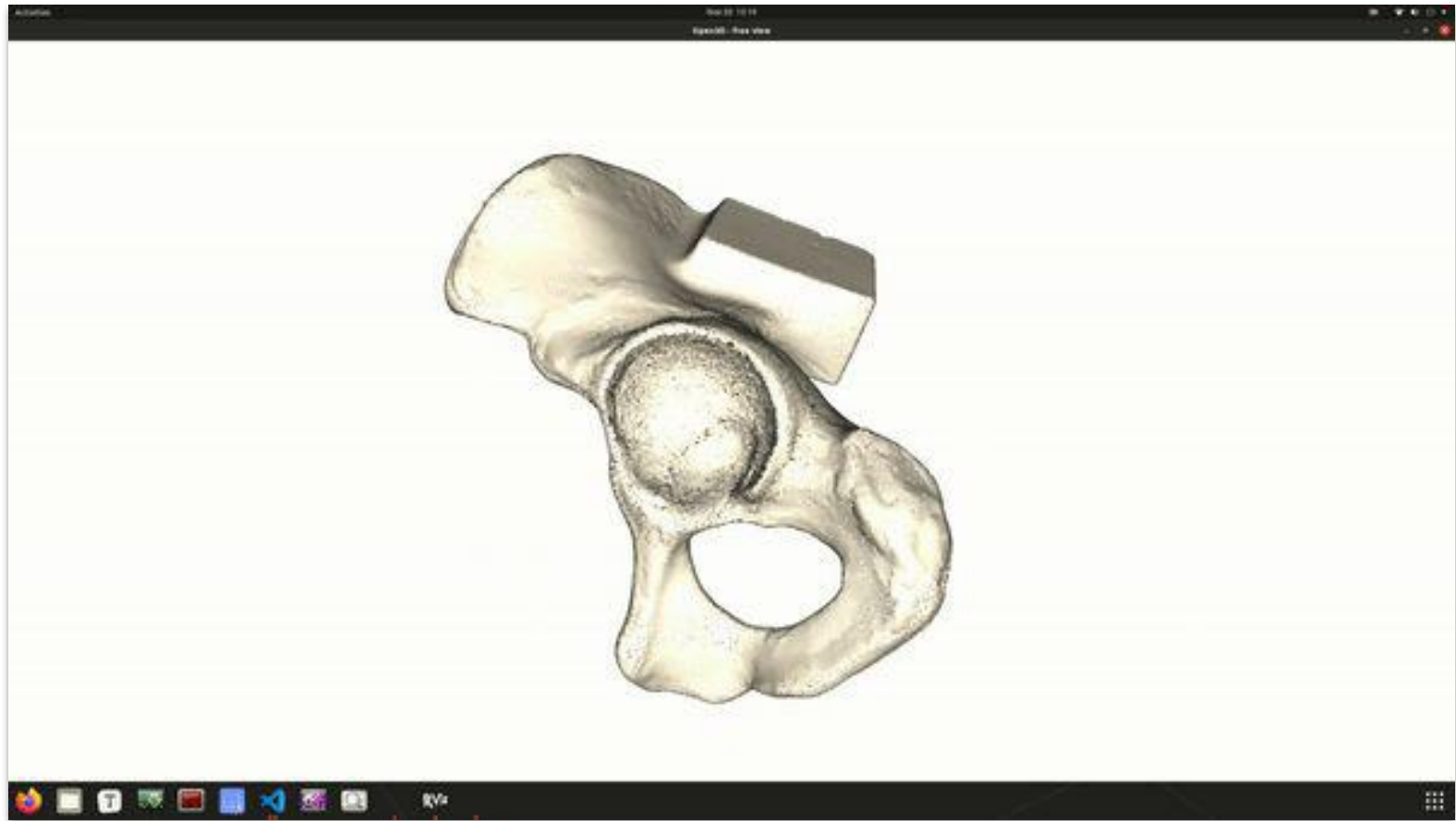




Zoom viewers watch System Cam

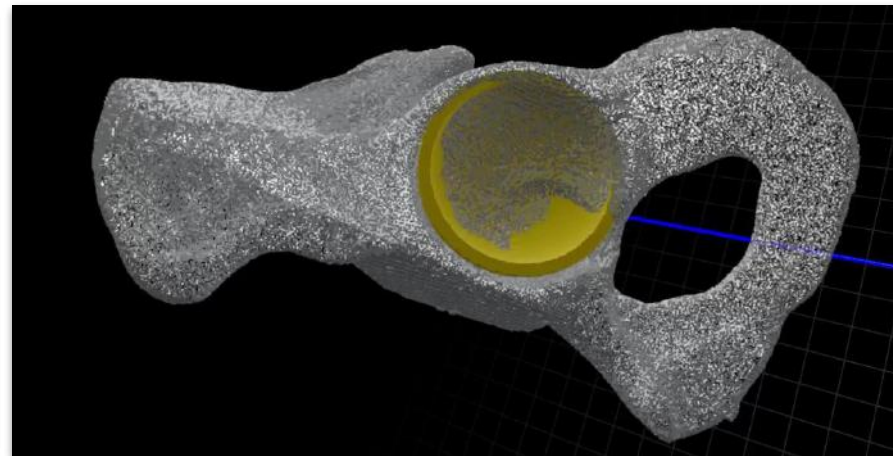
Landmark Selection + Registration

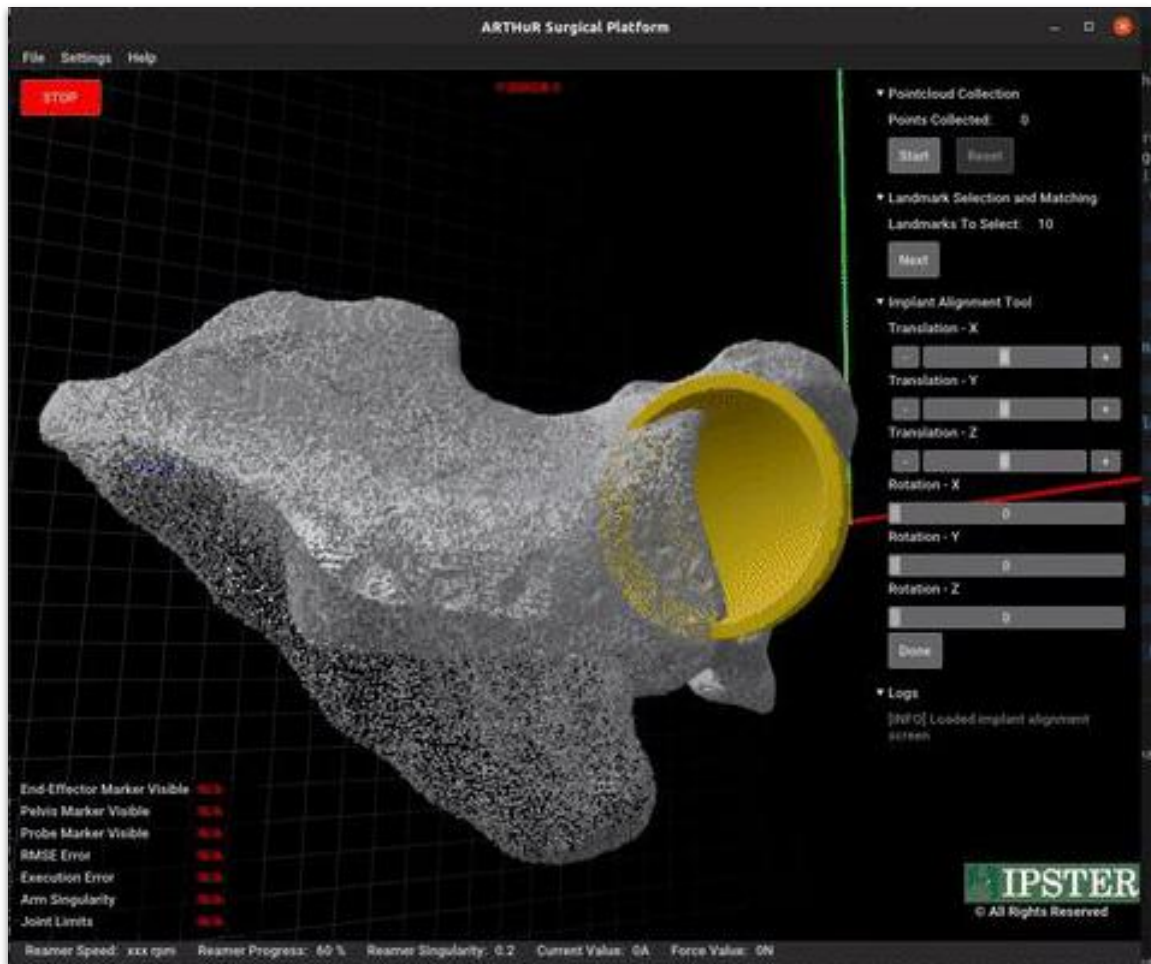




Zoom viewers watch here

Implant Alignment Tool (Surgeon UI)





Zoom viewers watch here

Task Prioritization Controls

Most Critical

**Pelvis
Alignment**

**Camera
Alignment**

**Joint Limit
Avoidance**

Least Critical

**Singularity
Avoidance**





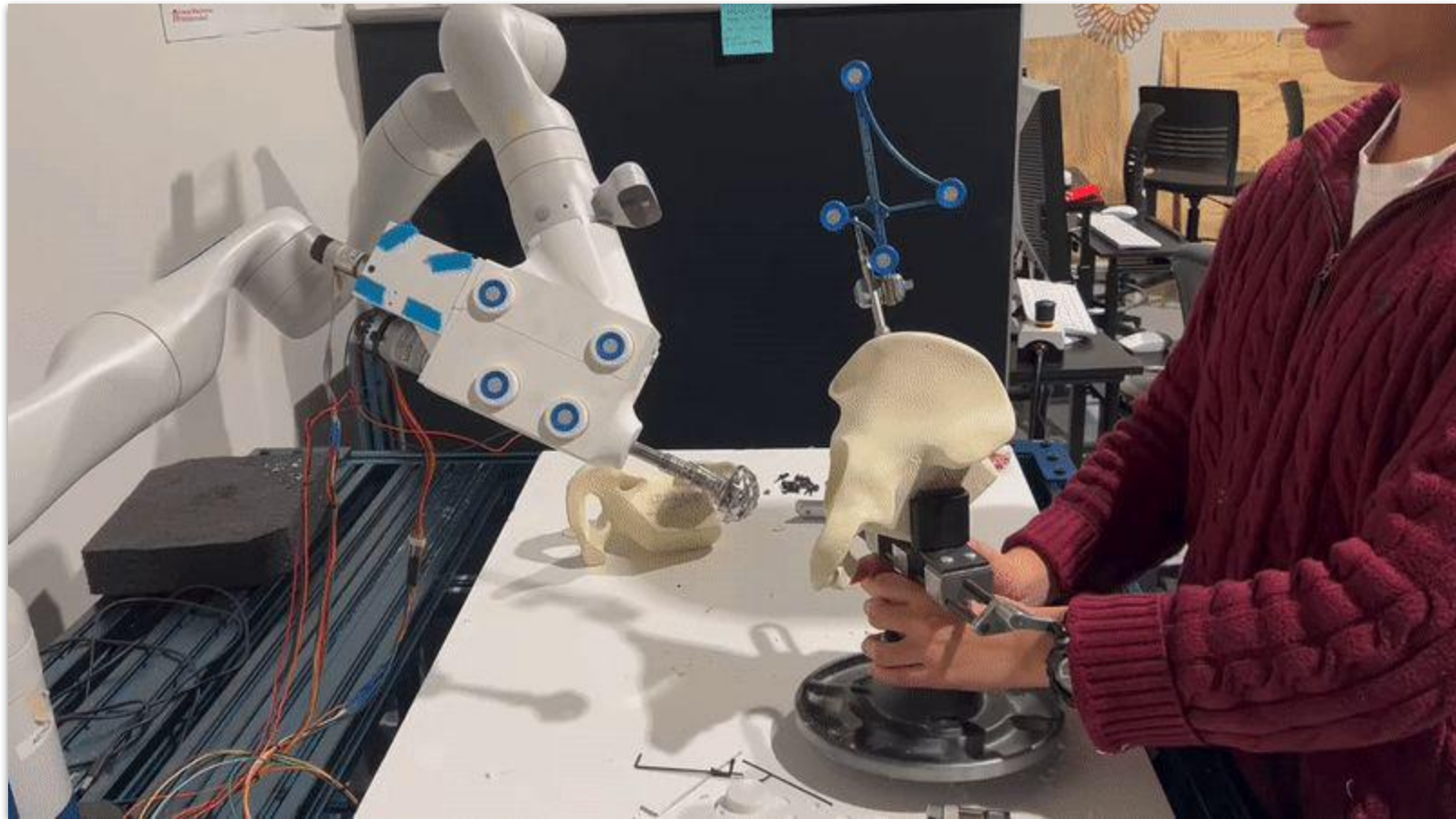
Zoom viewers watch System Cam

Dynamic Compensation



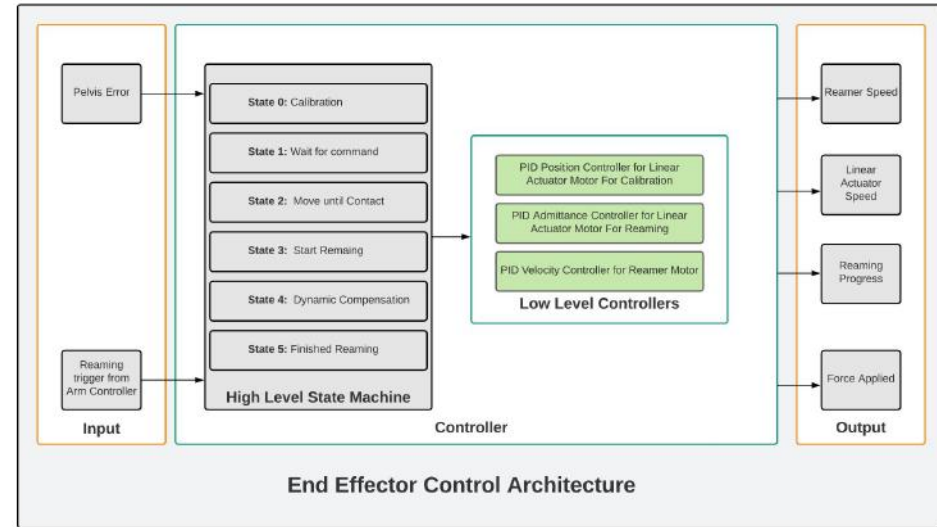
During total hip replacement surgery, the forces acting on the patient while reaming are high due to which the patient moves.

ARTHuR constantly checks for any movement of the patient above a certain threshold and adjusts for that movement, allowing for a consistent axis to be maintained with the acetabulum.



Zoom viewers watch System Cam

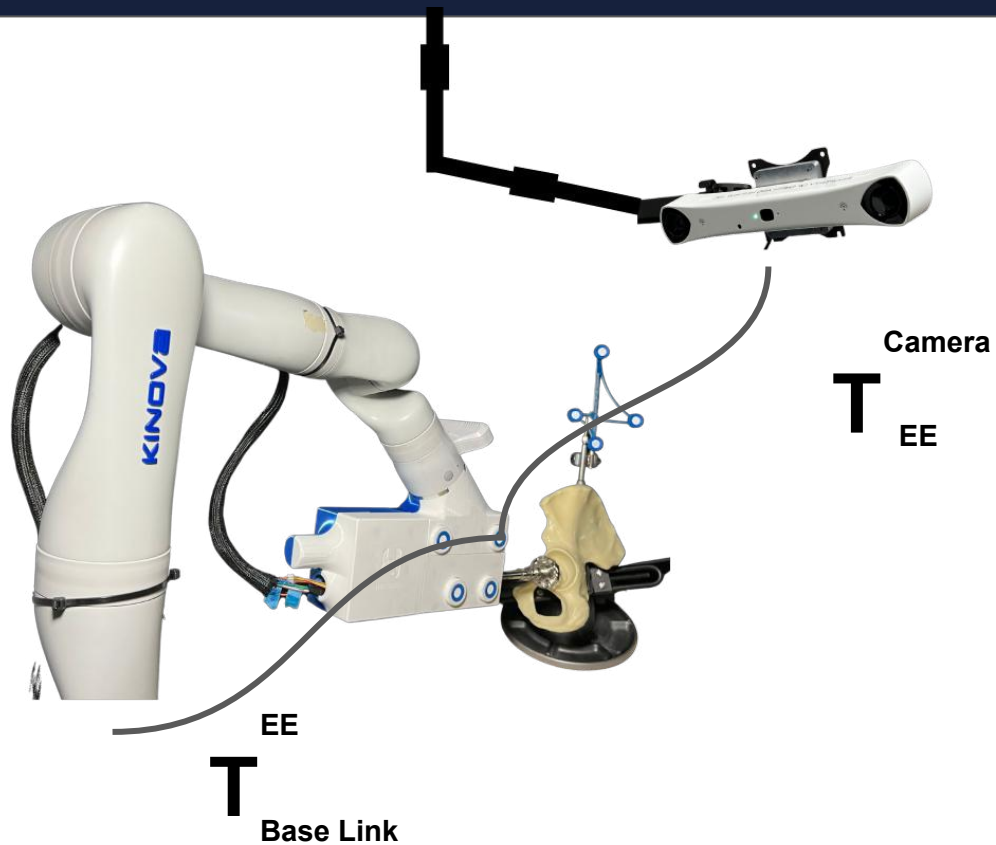
Reaming Controls





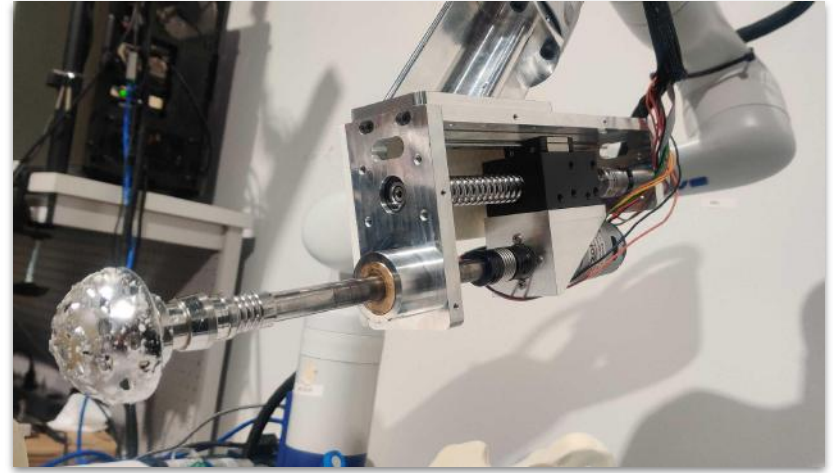
Zoom viewers watch System Cam

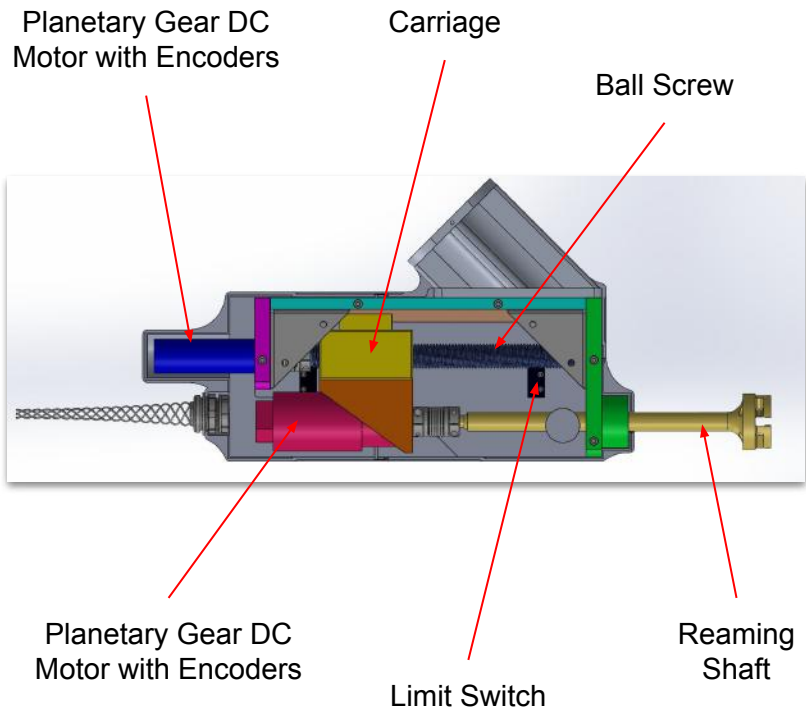
Online Calibration



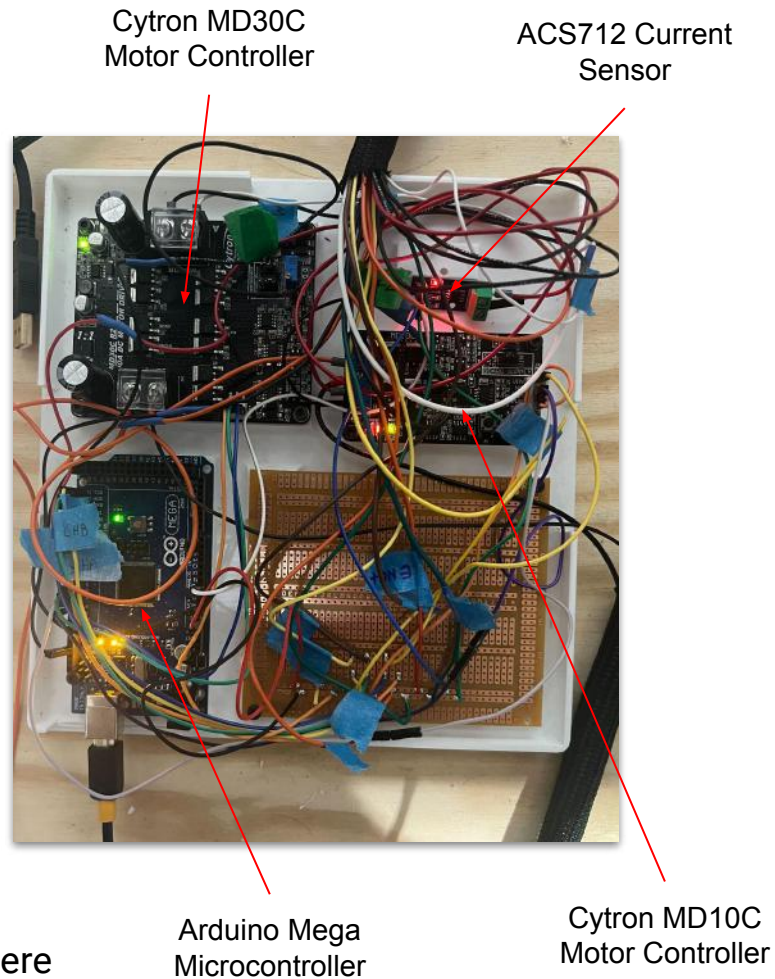
- **SVD: Offline Calibration**
 - Tsai-Lenz algorithm
 - Needs to be repeated if camera position changes
 - Time consuming
- Robust to changes in camera position
- Arm controls ensures markers are continuously visible to the camera

Hardware and Electrical

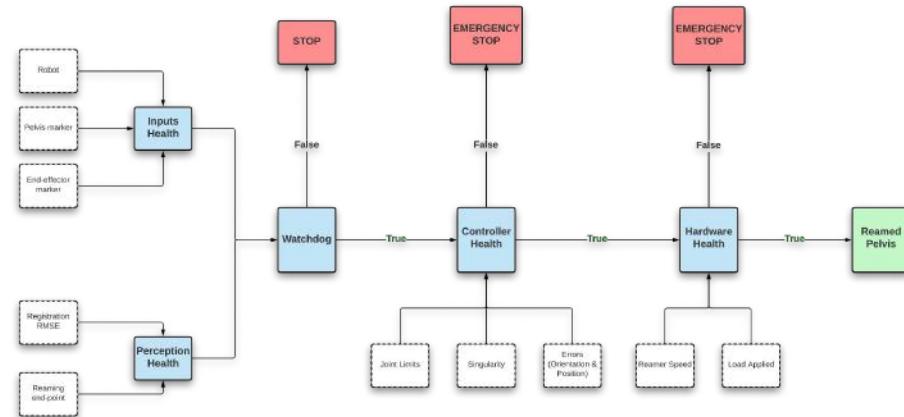


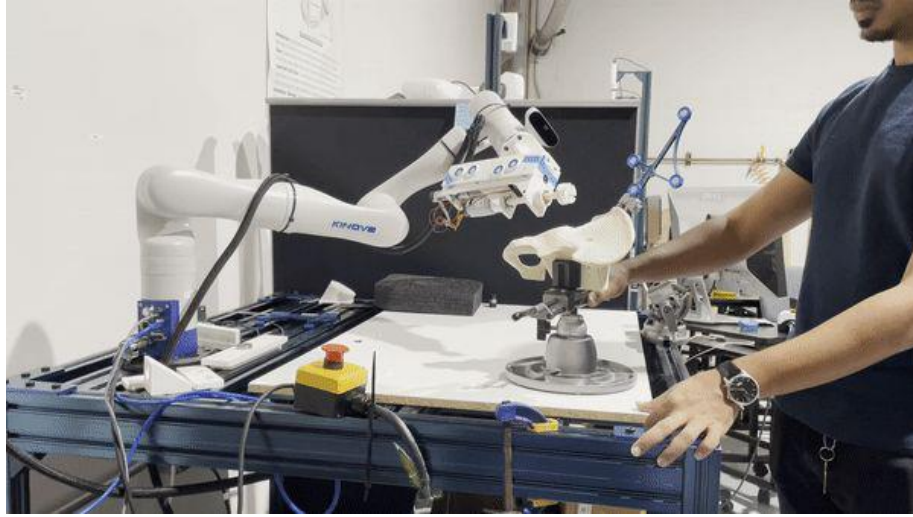


Zoom viewers watch here

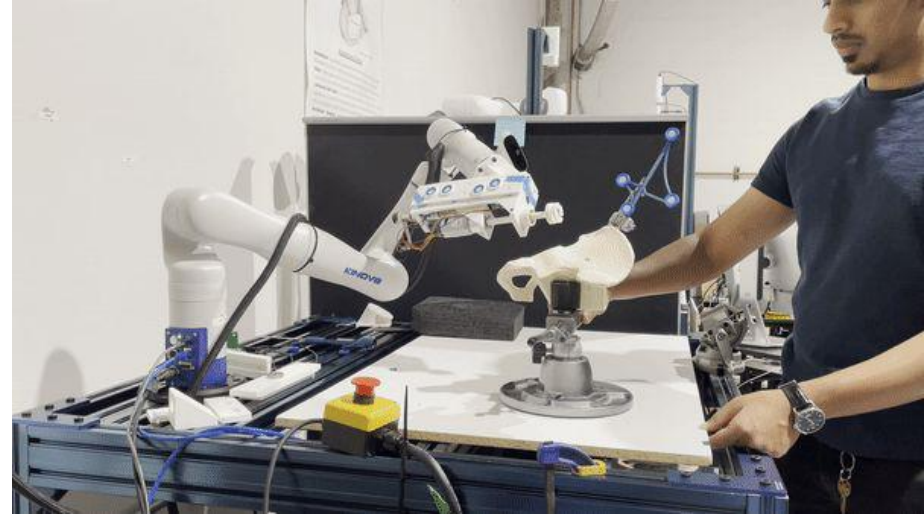


WatchDog



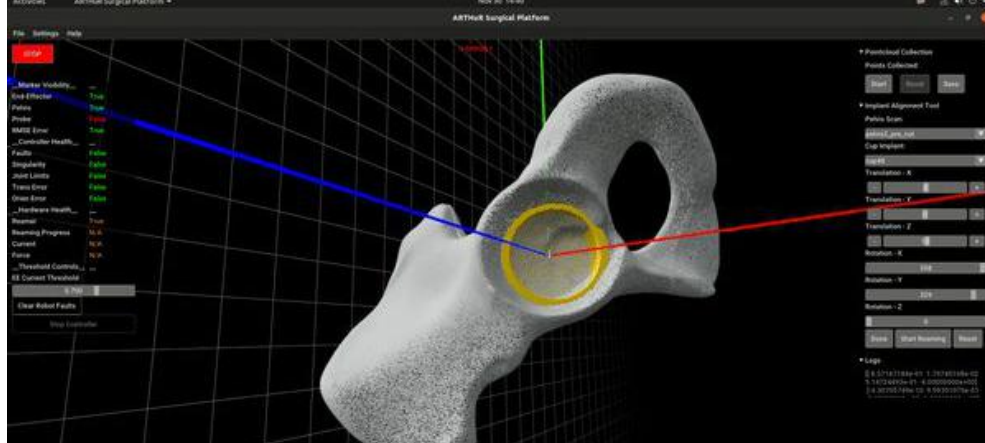


Pelvis not visible
(patient decides to run away)



Stops controller at any fault

Zoom viewers watch here

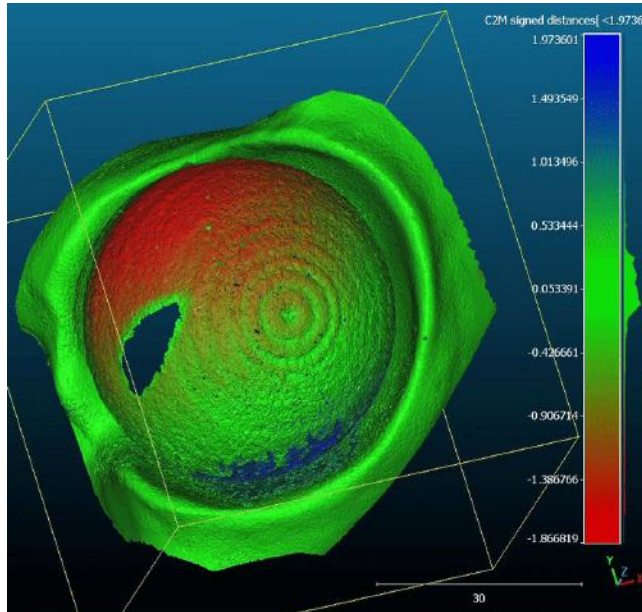


Zoom viewers watch here

System Validation



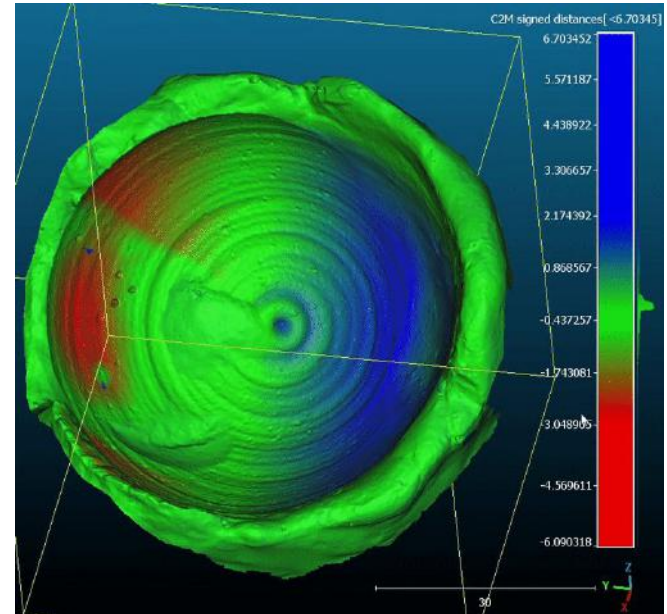
Test 1



Maximum Error: +2.0 mm

Average Error: 0.29 mm

Test 2

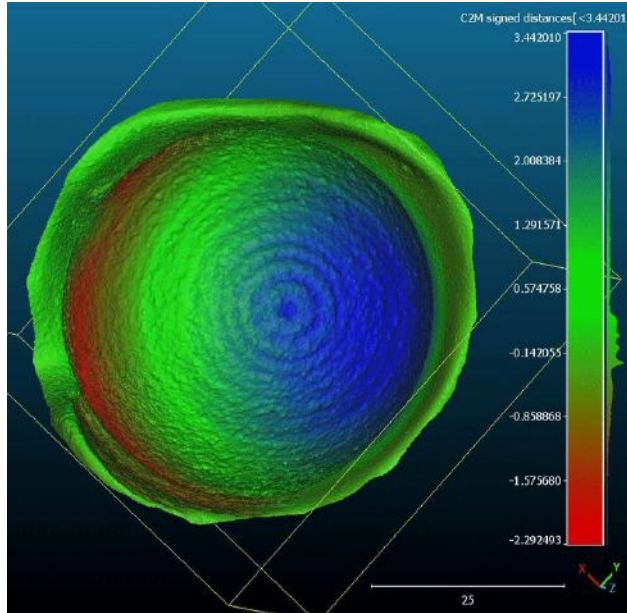


Maximum Error: -3.0 mm

Average Error: 0.43 mm

Zoom viewers watch here

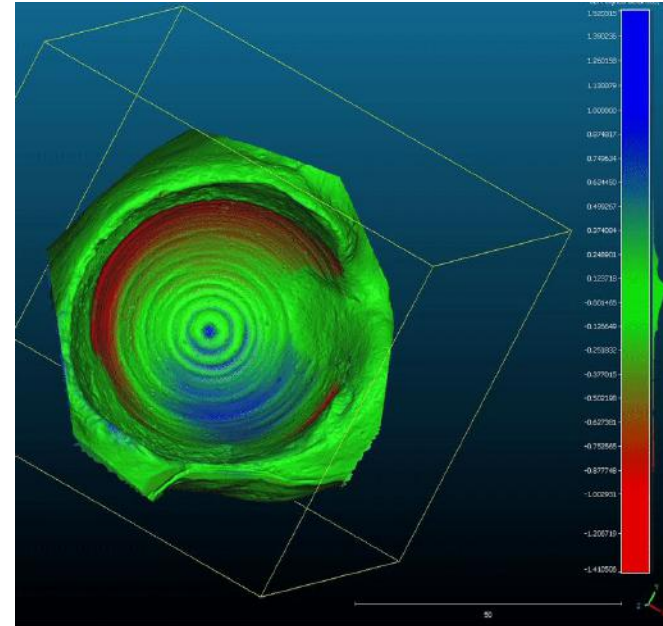
Test 3



Maximum Error: +3.4 mm

Average Error: 0.95 mm

Test 4



Maximum Error: -1.3 mm

Average Error: 0.42 mm

Zoom viewers watch here

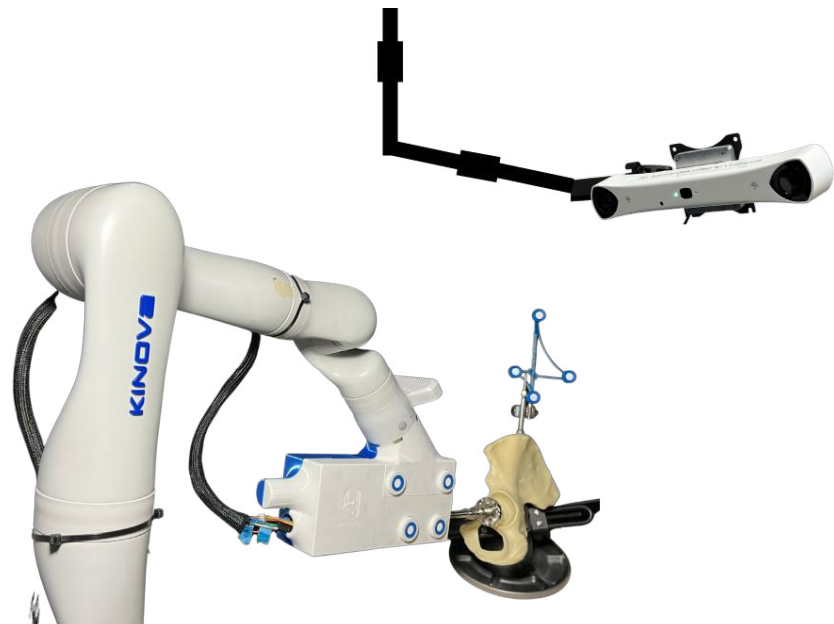
All Test Results







| Test No. | Max. Error |
|----------|------------|
| Test 1 | 2.0 mm |
| Test 2 | 3.0 mm |
| Test 3 | 3.4 mm |
| Test 4 | 1.3 mm |










Zoom viewers watch here

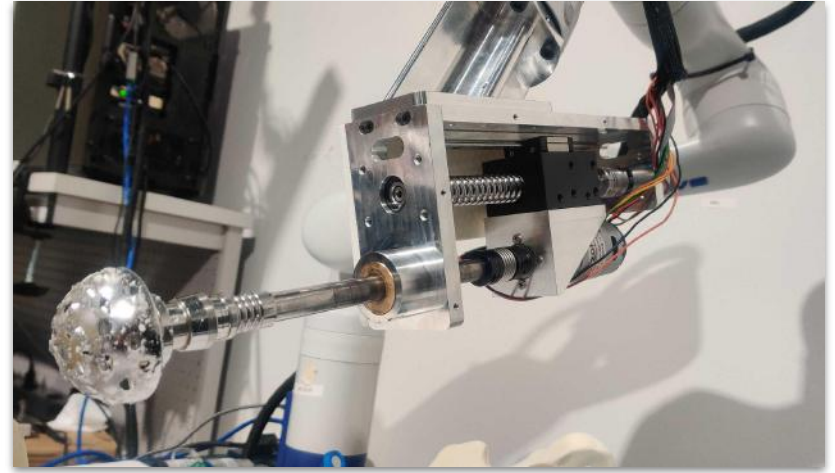
Performance Criteria



| Performance Requirements | Status |
|--|---|
| <p>M.P.1.1 The system shall use the Atracsys camera to track the pelvis, registration probe, and robot arm markers with a <i>frame rate</i> greater than or equal to 50 Hz or <i>latency</i> less than or equal to 25 milliseconds.</p> |  |
| <p>M.P.1.2 The system shall use the Atracsys camera to track the pelvis, registration probe, and robot arm markers with an <i>accuracy</i> of less than or equal to 0.55 mm.</p> |  |
| <p>M.P.2.1 The system shall continuously calculate the error in pelvis movement with a <i>frame rate</i> greater than or equal to 40 Hz or <i>latency</i> less than or equal to 25 milliseconds.</p> |  |
| <p>M.P.2.2 Use the Atracsys camera to track the pelvis and robot arm error with a <i>position accuracy</i> less than or equal to 2 mm.</p> |  |
| <p>M.P.2.3 Use the Atracsys camera to track the pelvis and robot arm error with an <i>orientation accuracy</i> less than or equal to 1.5 degrees.</p> |  |
| <p>M.P.3 The system shall perform registration between the collected point cloud and the given 3D pelvis scan with a <i>root mean square (RMS) error</i> of 1 mm.</p> |  |

| Performance Requirements | Status |
|--|---|
| M.P.4.1 The system shall start dynamically compensating for the movement of the pelvis by commanding the end-effector to retract and/or power off the reamer with a <i>latency</i> of less than or equal to 25 milliseconds when the <i>error thresholds</i> exceed 2 mm and 1.5 degrees . |  |
| M.P.4.2 The system shall dynamically compensate for the movement of the pelvis by beginning to realign the reamer with a <i>latency</i> of less than or equal to 50 milliseconds . |  |
| M.P.5.1 The system shall ream the pelvis based on the provided surgical plan with a <i>positional accuracy</i> of 2 mm . |  |
| M.P.5.2 The system shall ream the pelvis based on the provided surgical plan with an <i>orientation accuracy</i> of 1.5 degrees . |  |
| M.P.6 The system will allow the surgeon to place the robot arm in an initial position by back-driving the robotic arm. |  |
| M.P.7 The system will provide the surgeon with visual feedback with a latency less than or equal to 150 milliseconds . |  |
| M.P.8 The system will allow the surgeon to e-stop the system, stopping the system within a <i>latency</i> of 500 milliseconds . |  |

End-Effector Validation



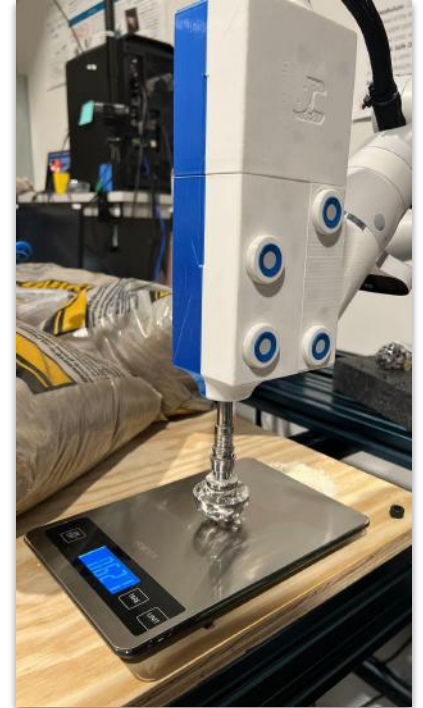
End-Effector Validation

Validation Criteria

1. Force should not exceed **100 N**
 - a. Max force is **62.3 N**
2. Linear position should be accurate to **0.5 mm**
 - a. 5 mm traveled per revolution / 230.7 encoder ticks per revolution = **0.02 mm**
 - b. +/- 5 ticks accuracy = +/- **0.10 mm**
3. Vibration in the end-effector shouldn't contribute to dynamic compensation
 - a. **Vibrations occur in the arm** and not in the end-effector
4. Weight should be less than 4 kg
 - a. Total weight is **2.15 kg**

End-Effector Forces

| | |
|--------------|--------|
| Max Force | 62.3 N |
| Mean Force | 37.6 N |
| StDev Force | 9.7 N |
| Min Force | 14.3 N |
| Median Force | 36.4 N |



What you saw today



A **robot arm** for **total hip replacement** surgery that **dynamically compensates** for patient movement and **improves patient outcomes!**

Thank you for
your support!

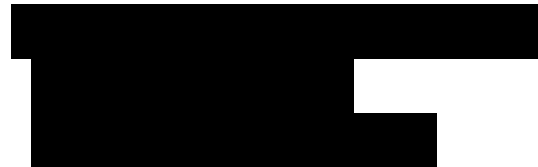


MRSD Advisors:

- John Dolan
- Dimi Apostolopoulos

CMU Professors:

- Professor Kroemer
- Professor Riviere



November 21, 2022



HIPSTER

Questions and Discussion

Autonomous Reaming for Total Hip
Replacement (ARTHUR)

