

## Introduction

Building on DaVinci Surgical Robot and continuum robotic technologies, we've prototyped a continuum surgical robot that addresses the limitations of traditional rigid robots in surgical robotics systems,

## The Problem

Conventional surgical robots are struggling with maneuvering in tight spaces and performing delicate tasks. The solution is needed to enhance the **reachability** and **adaptability** of surgical robots.

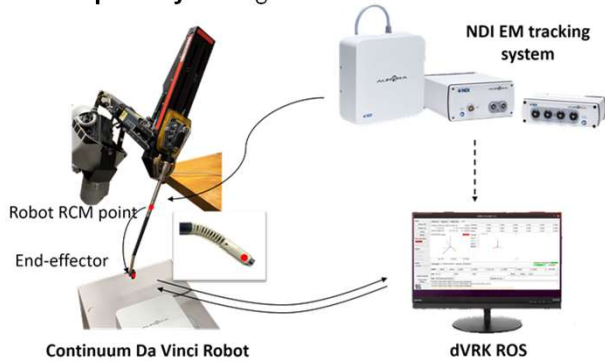


Figure 1. Workflow of the continuum dVRK

## The Solution

- Prototyped a continuum robot that integrated an Acunav catheter into the dVRK baseplate. (Chenhan)
- Calibrated the NDI Aurora system for registration and precise control. (Jaspur)
- Modelled a unique configuration for continuum robot motion planning via dVRK GUI and ROS; apply forward and inverse kinematics. (Heyun)

### a). Prototyping

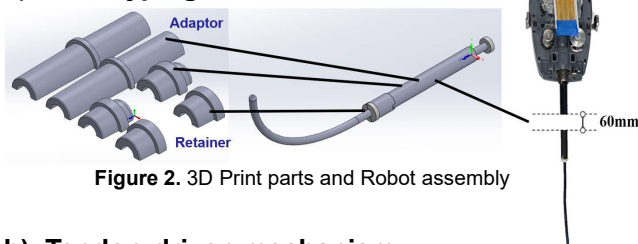


Figure 2. 3D Print parts and Robot assembly

### b). Tendon-driven mechanism

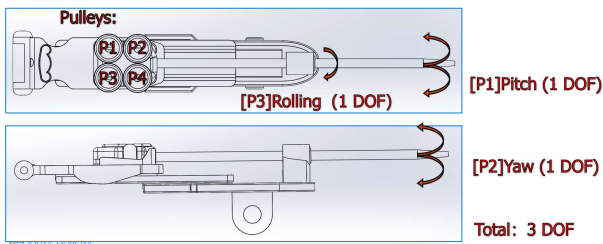
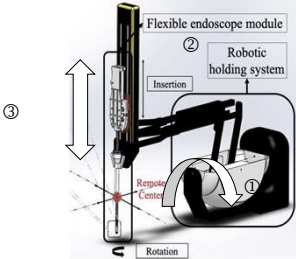


Figure 3. Mechanism

### c). Calibration and registration

- NDI Aurora EM tracking system is combined into ROS with real-time response
- Use Least-square optimization to estimate RCM point

### d). Forward Kinematics



q1: Yaw angle  
q2: Pitch angle  
q3: Insertion

D-H PARAMETERS

Link	$a_i$	$\alpha_i$	$d_i$	$\theta_i$
0 → 1	0	$-\pi/2$	0	$q^1$
1 → 2	0	$-\pi/2$	0	$q^2$
2 → 3	$a$	$-\pi/2$	0	$q^3$

$\alpha$ : Bending angle  
 $\Theta$ : Bending plane angle  
 $\gamma$ : Rolling around Z-axis

D-H PARAMETERS

Link	$a_i$	$\alpha_i$	$d_i$	$\theta_i$
0 → 1	0	0	$d$	0
1 → 2	0	0	0	$\gamma$
2 → 3	0	0	0	$\theta$
3 → 3'	0	$-\pi/2$	0	0
3' → 4	0	$\pi/2$	0	$\alpha/2$
4 → 5	0	$-\pi/2$	$2 \frac{L}{2} \sin \frac{\alpha}{2}$	0
5 → 6	0	$\pi/2$	0	$\alpha/2$
6 → 7	0	0	0	$-\theta$

Figure 4. Forward kinematics methodology [1] [2]

### e). Inverse Kinematics

$$\text{Pitch: } \phi_1 = 2R_c \alpha \cos \theta / D_{knob} \quad J^s = \left[ \left( \frac{\partial g}{\partial q_1} g^{-1} \right)^v \dots \left( \frac{\partial g}{\partial q_n} g^{-1} \right)^v \right]$$

$$\text{Yaw: } \phi_2 = -R_c \alpha \sin \theta / D_{knob}$$

$$\text{Rolling: } \phi_3 = \gamma \quad J^s \dot{q} = \begin{bmatrix} v^s \\ \omega^s \end{bmatrix}$$

## Outcomes and Results

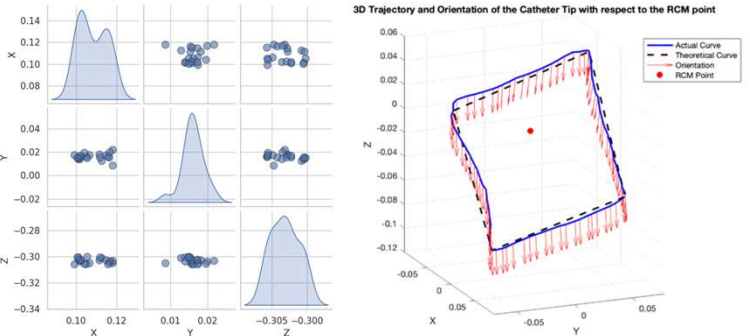


Figure 5. RCM calibration result (left); trajectory of catheter tip (right)

## Future Work

Our project will be continued this summer, focusing on:

- Achieving accurate control of the integrated dVRK-AcuNav catheter system.
- Expanding our capabilities for manipulating the continuum robot through teleoperation.
- Implementing and testing ultrasound imaging on an appropriate phantom.

## Credits

Heyun Wang: Kinematics modeling; Jaspur Jiang: NDI EM tracking; Chenhan Zhang: Design and manufacturing

## Support by and Acknowledgements

We would like to thank Anton Deguet, Dr. Emad Bector, and Dr. Iulian Iordachita for their selfless technical support and guidance.

## Reference

- [1] Tobe, F., Max Planck Institute for Intelligent Systems, Frontiers Journals & Blog, International Federation of Robotics (IFR), University of Bristol, & Robotics, N. (n.d.). Intuitive Surgical da Vinci Surgical System gets big endorsement and new competition - Robohub. Retrieved May 10, 2023, from Robohub.org website: <https://robhub.org/intuitive-surgical-da-vinci-surgical-system-gets-big-endorsement/>
- [2] Degirmenci, A., Loschak, P. M., Tschabrunn, C. M., Anter, E., & Howe, R. D. (2016, May). Constrained catheter shaft motion in cardiac catheters. In 2016 IEEE International Conference on Robotics and Automation (ICRA) (pp. 4436-4442). IEEE.