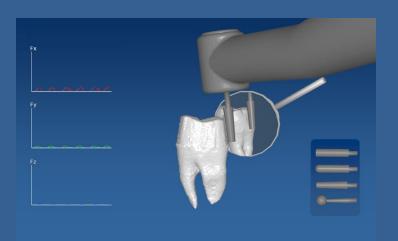
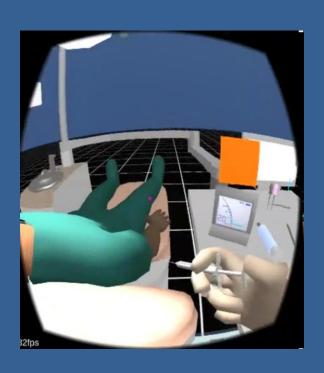


# Intelligent Virtual Environments for Surgical Training

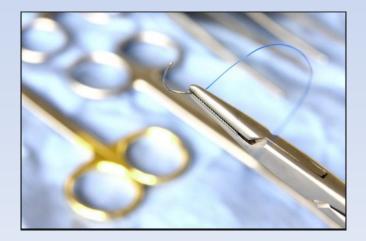


Peter Haddawy
Faculty of ICT
Mahidol University

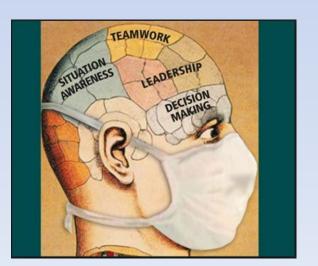


# Surgical Skills

- Technical
  - Instrument use & handling
  - Dexterity
  - Knowledge of anatomy
  - 3-D spatial reasoning

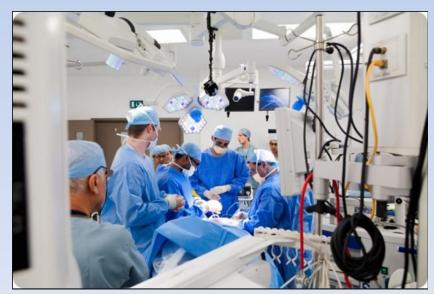


- Non-Technical
  - Communication
  - Teamwork
  - Leadership
  - Decision Making



# Challenges in Surgical Training

- Increasing enrollments and lack of expert surgeons to provide sufficient level of supervised training
- Desire to include assessment of procedure quality in student portfolios
- Subjectivity of assessment
- Desire for standardization of procedures



## Benefits of Simulation

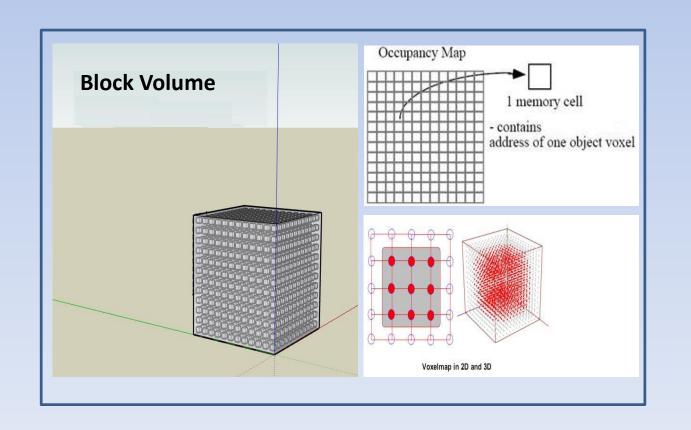
- Increased training time at little or no incremental cost
- Rare and dangerous scenarios
- Encourages experimentation and learning from mistakes
- Assessment of not just outcome but also process
- Provide causal explanations
- New modalities for feedback and guidance not possible in the physical world

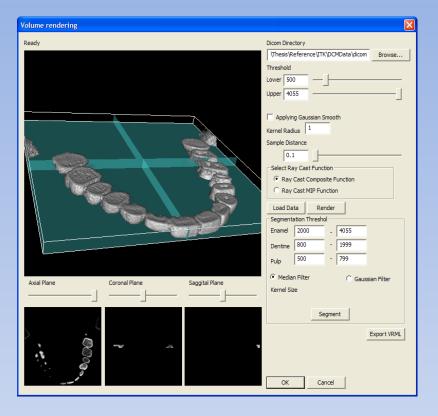


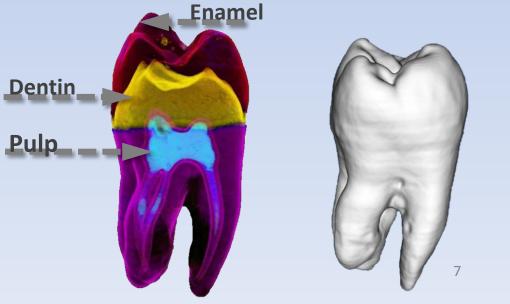
# **Dental VR Simulator**

## Data Acquisition

- Acquire tooth data using 3D micro CT
- Segment into tissue types and densities
- Represent as 3D occupancy map = voxels

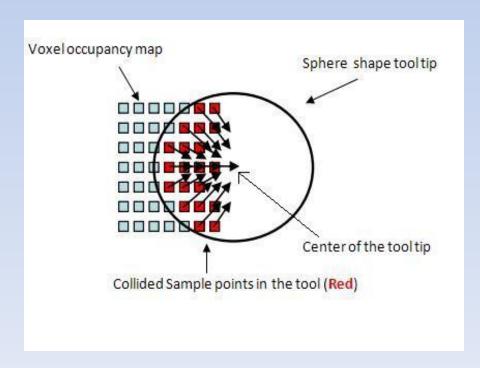




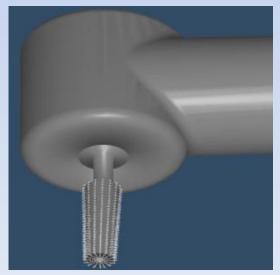


# Haptic VR Dental Simulator

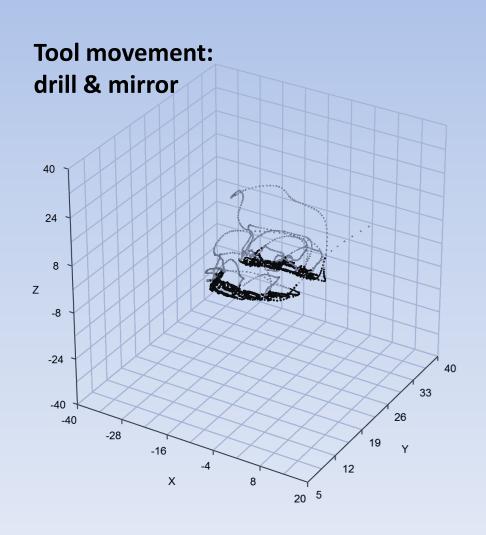
- Two haptic devices: handpiece and dental mirror
- Haptic feedback computed for handpiece: tissue density, force, angle



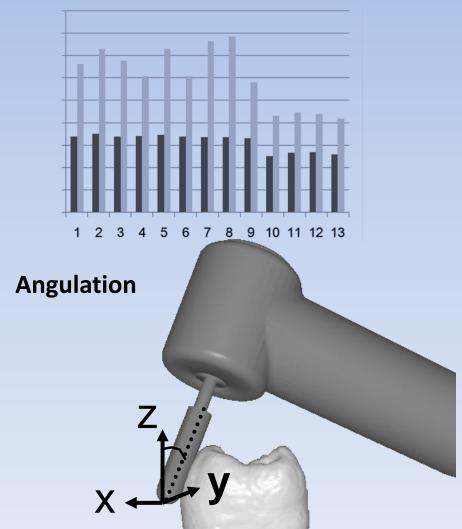




## Kinematic Variables



### **Applied force**



## Transferability of Learned Skills





32 4<sup>th</sup> year dental students

**Group 1** – Experimental (n = 16)

Root canal access opening using VR simulator

**Group 2** – Control (n = 16)

Root canal access opening using **phantom head** 

Pre-test - Access opening on extracted maxillary molar using phantom head

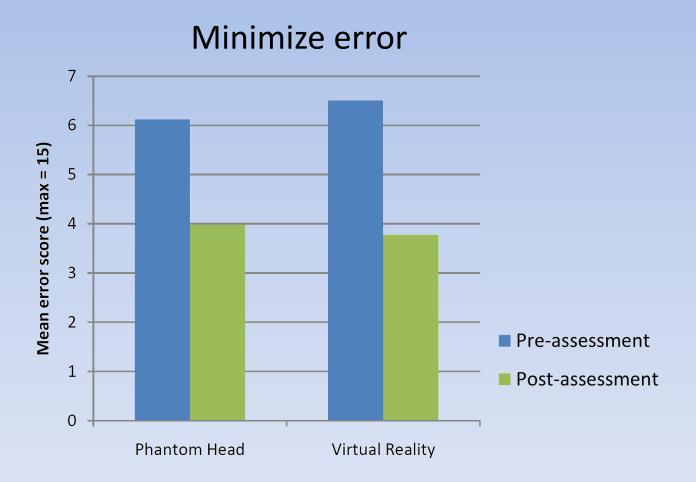
3 days of 2h training

3 days of 2h training

Post-test - Access opening on extracted maxillary molar using phantom head

# Transferability of Skills

- Post-test performance significantly improved over pre-test performance in both groups.
- Difference in error score reduction was not significant.



How can we use the simulator to provide enhanced feedback?

## Intelligent Formative Feedback

- Assessment of outcome
- Four axial walls
- **Pulp floor**
- **Overall outcome**



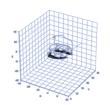
- Analysis of relation between procedure and outcome
- Force
- Orientation
- **Movement patterns**

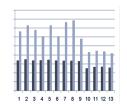


Analysis of procedure

**Hand movement** 

**Applied force** 





Orientation



Time taken

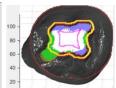


Deliver feedback in the language natural to the students

**Text** 

There is an over-drilled area in the **distal** wall because the amount of force applied in this wall is the substantially higher than the expert.









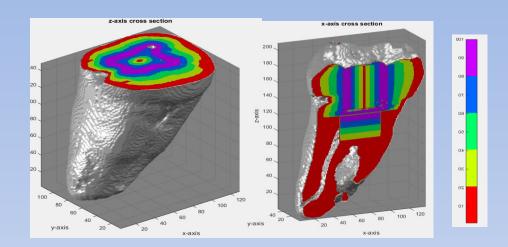
Video **Graphics** 

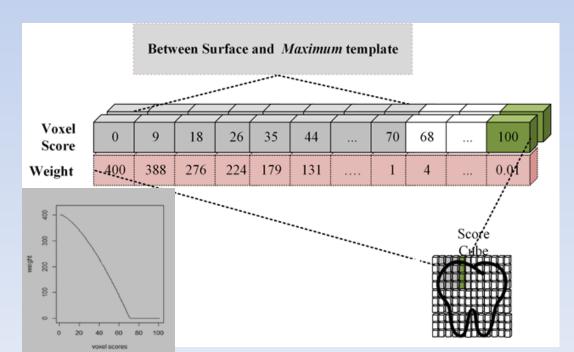
**Haptics** 

### Assessment of Outcome

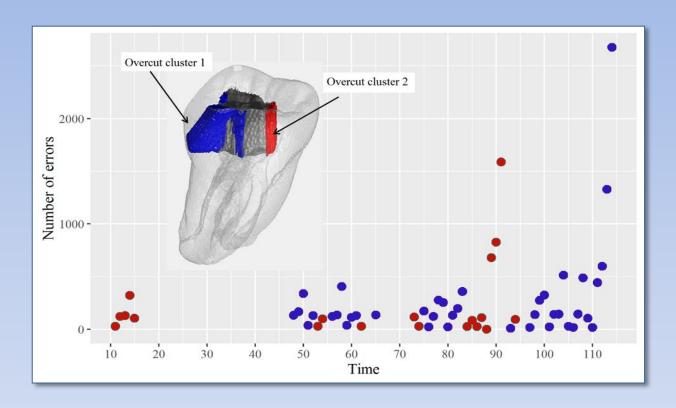
- Max, Min, Optimal templates generated based on tooth anatomy
- Interpolate scores between templates and template to surface
- Detailed score information for entire tooth
- Translation into language commonly used in dental surgery
- High agreement with expert scores

M. Su Yin, P. Haddawy, S. Suebnukarn, P. Rhienmora, Automated Outcome Scoring in a Virtual Reality Simulator for Endodontic Surgery, *Computer Methods and Programs in Biomedicine*, 153, pp 53-59, 2018.

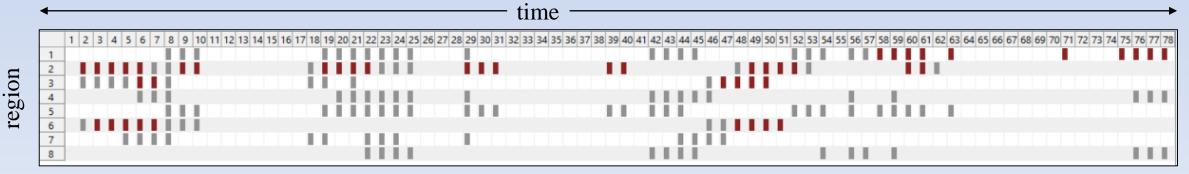




# Correlating Procedure and Outcome

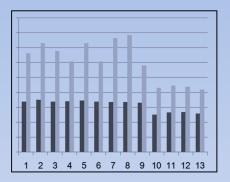


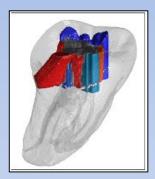
Region	
1	Mesial wall
2	Lingual wall
3	Distal wall
4	Buccal wall
5	Mesiolingual border
6	Distolingual border
7	Distobucco border
8	Mesiobucco border

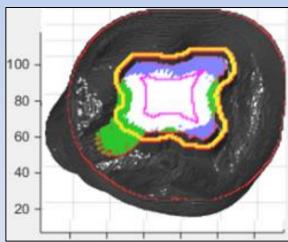


## Multimodal feedback

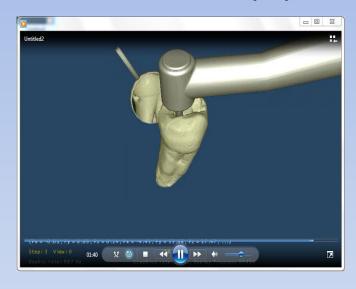
#### **Visual + Textual**



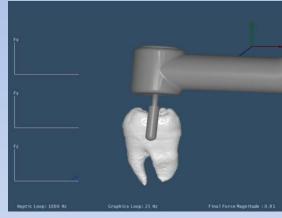




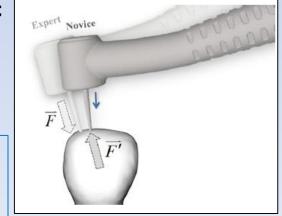
#### **Enhanced Replay**





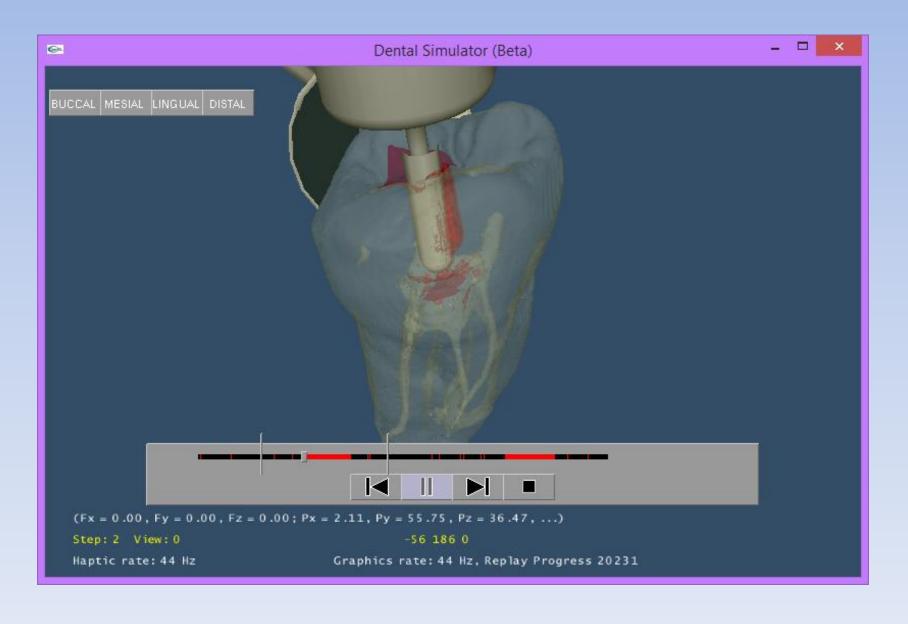


#### Haptic

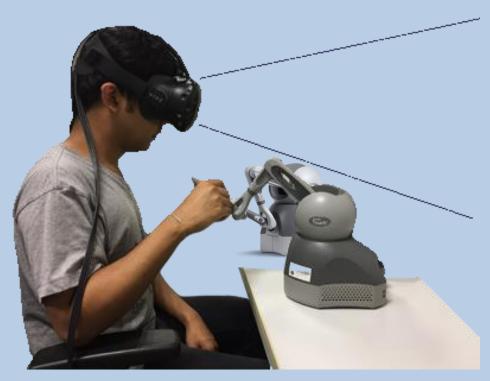


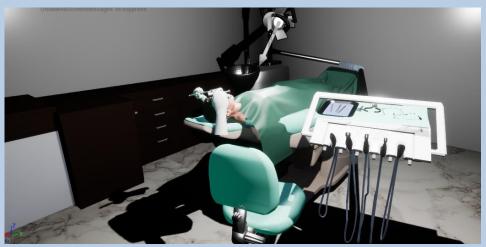
M. Su Yin, P. Haddawy, S. Suebnukarn, H. Schultheis, Use of Haptic Feedback to Train Correct Application of Force in Endodontic Surgery, *Proc.* 22<sup>nd</sup> ACM *Int'l Conf. on Intelligent User Interfaces* (IUI 2017), Limassol, March 2017.

# Enhanced Visual Replay Formative Feedback



# **Immersive Simulator**







### Conclusions & Future Work

- Virtual environments provide a new opportunity for more effective teaching
  - Detailed data on problem solving activity
  - New modalities for feedback and guidance not possible in the physical world
- Techniques shown are general and apply across a wide variety of problem domains
- Ongoing work
  - Incorporate eye tracking
  - Generate symbolic descriptions of kinematic data
  - Differentiate between cognitive and physical sources of errors
  - Simulator for training spinal surgery

### Thanks to

### Collaborators and Grad Students

- Prof. Siriwan Suebnukarn
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