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(54) **TECHNIQUES FOR MODIFYING TOOL OPERATION IN A SURGICAL ROBOTIC SYSTEM BASED ON COMPARING ACTUAL AND COMMANDED STATES OF THE TOOL RELATIVE TO A SURGICAL SITE**

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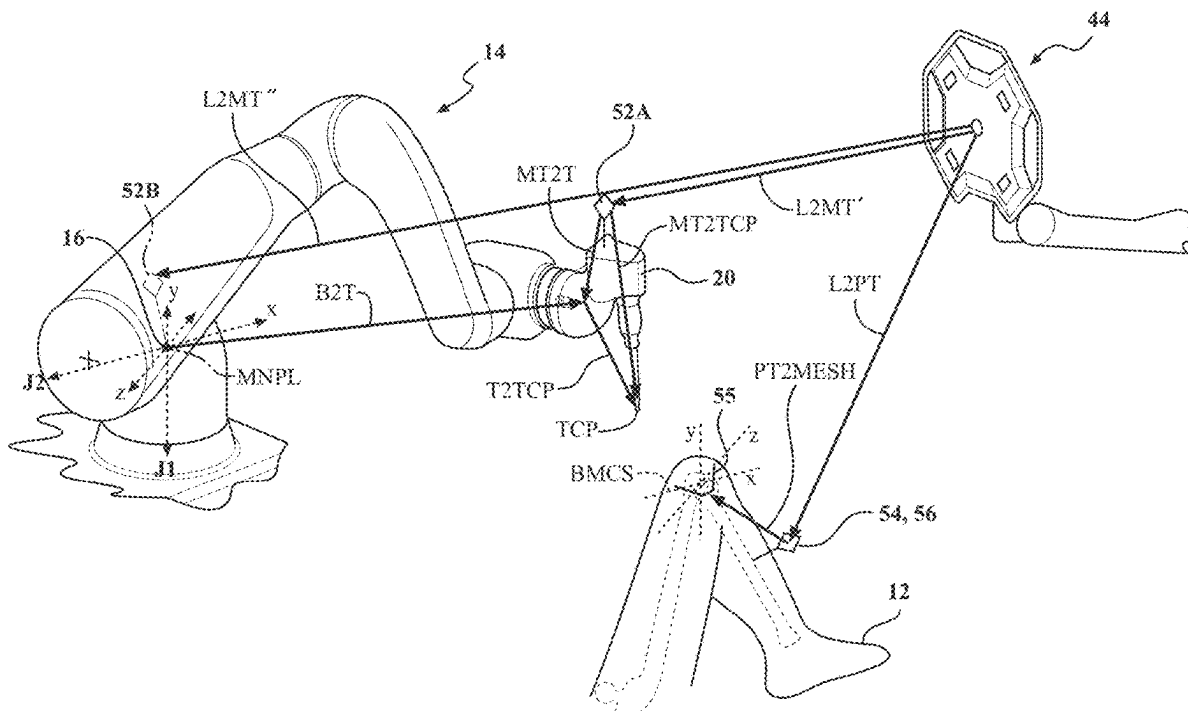
(2016.02); *A61B 2034/2074* (2016.02); *A61B*

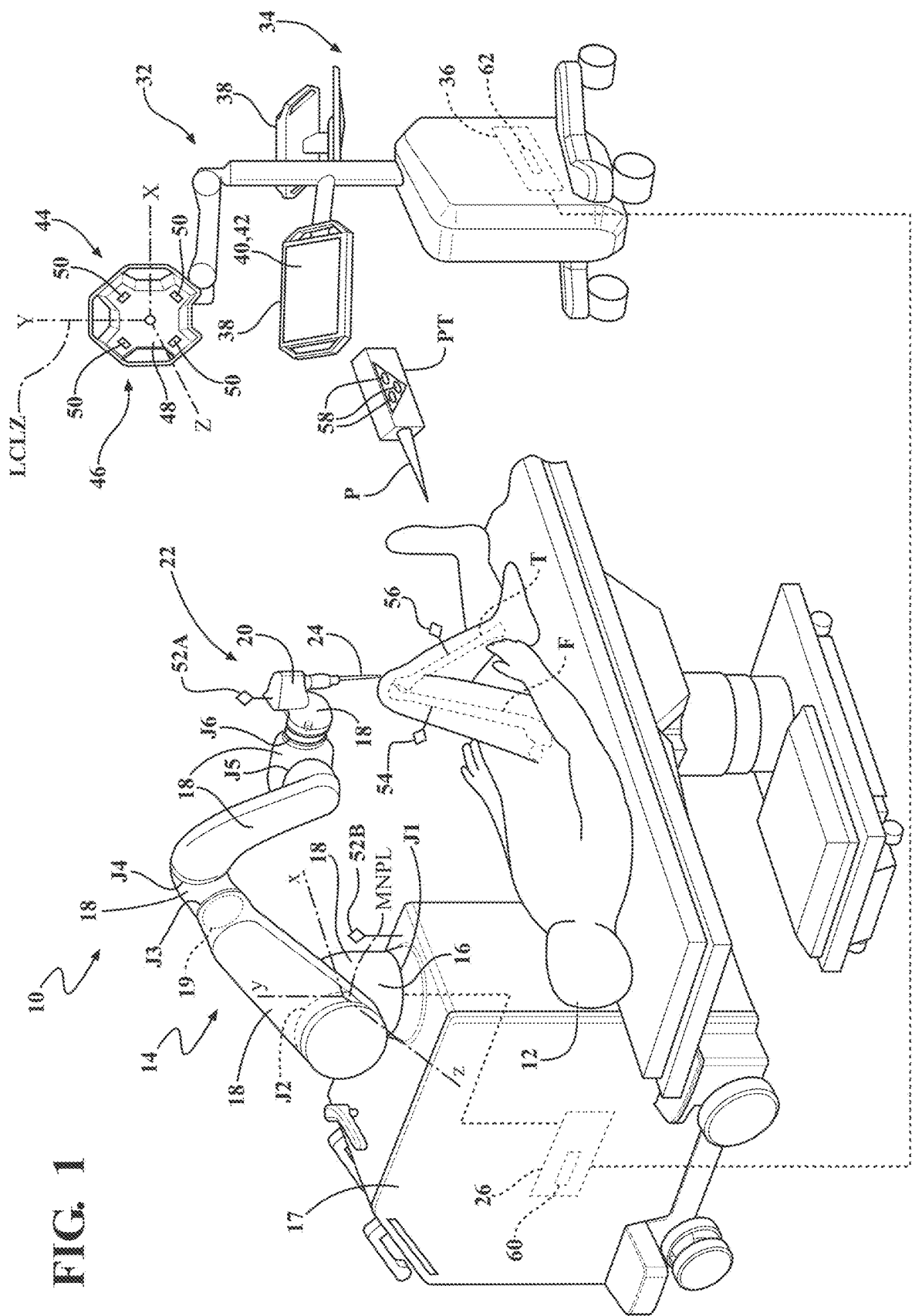
34/32 (2016.02); *Y10S 901/09* (2013.01)

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ABSTRACT

A surgical system and method of operating the same. A manipulator supports and facilitates movement of a surgical tool along a tool path relative to a surgical site. Controller(s) determine commanded states and actual states of the surgical tool relative to the tool path for a plurality of time steps. The controller(s) detect at least one deviation between the commanded states and the actual states of the surgical tool for at least one of the plurality of time steps. The controller(s) respond to the deviation by modification of one or both of: a feed rate of the surgical tool; and the tool path.





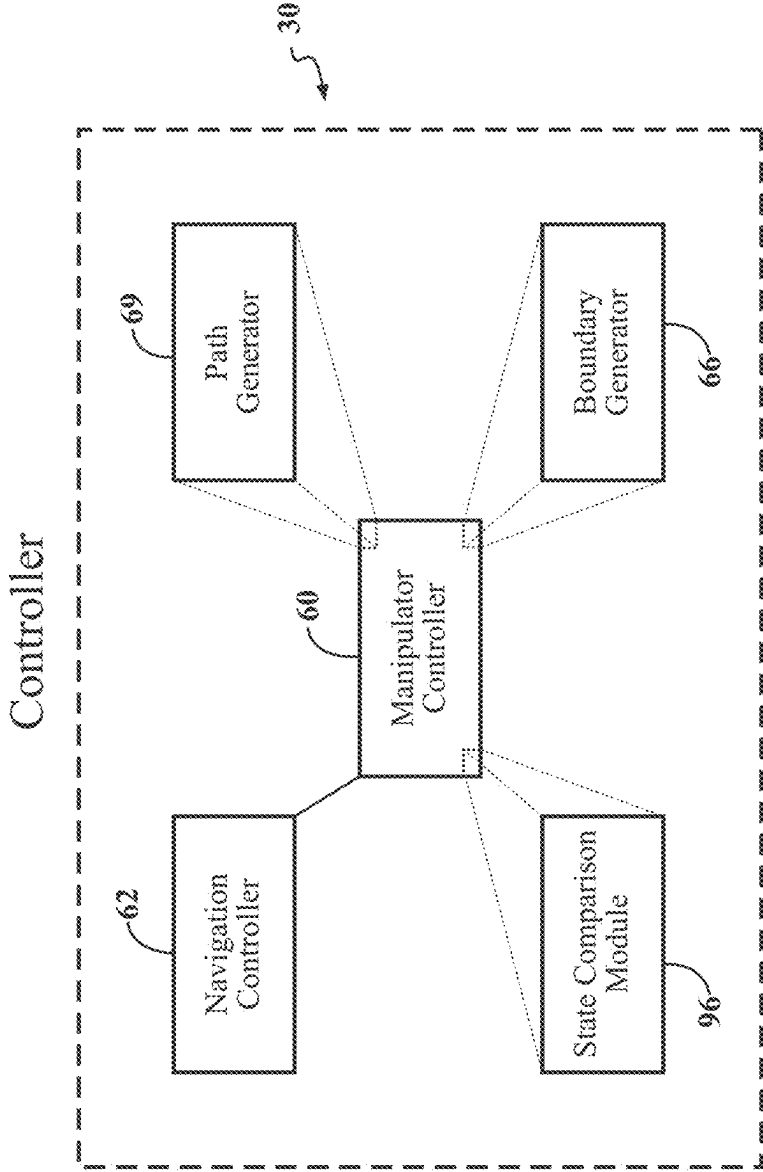


FIG. 2

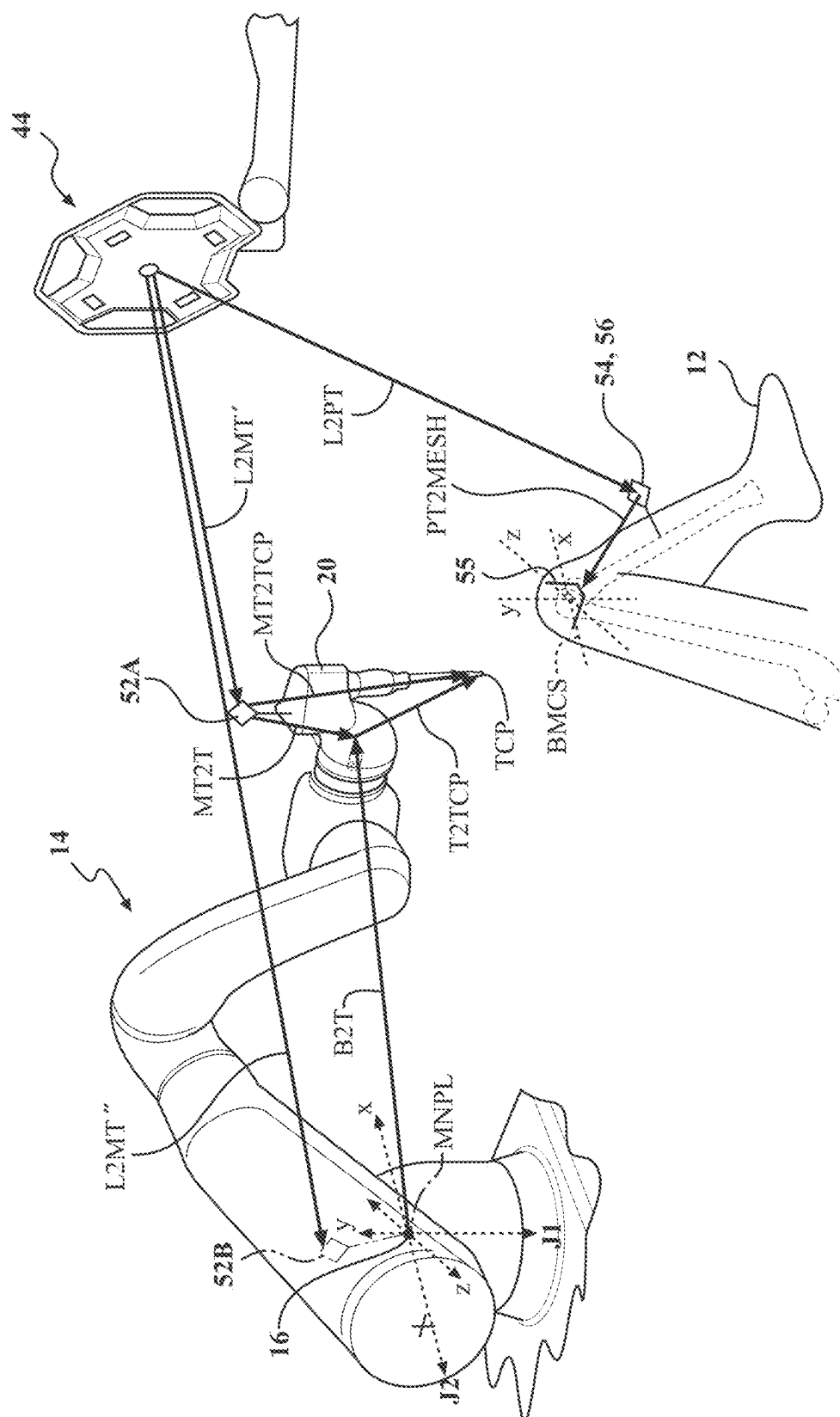


FIG. 3

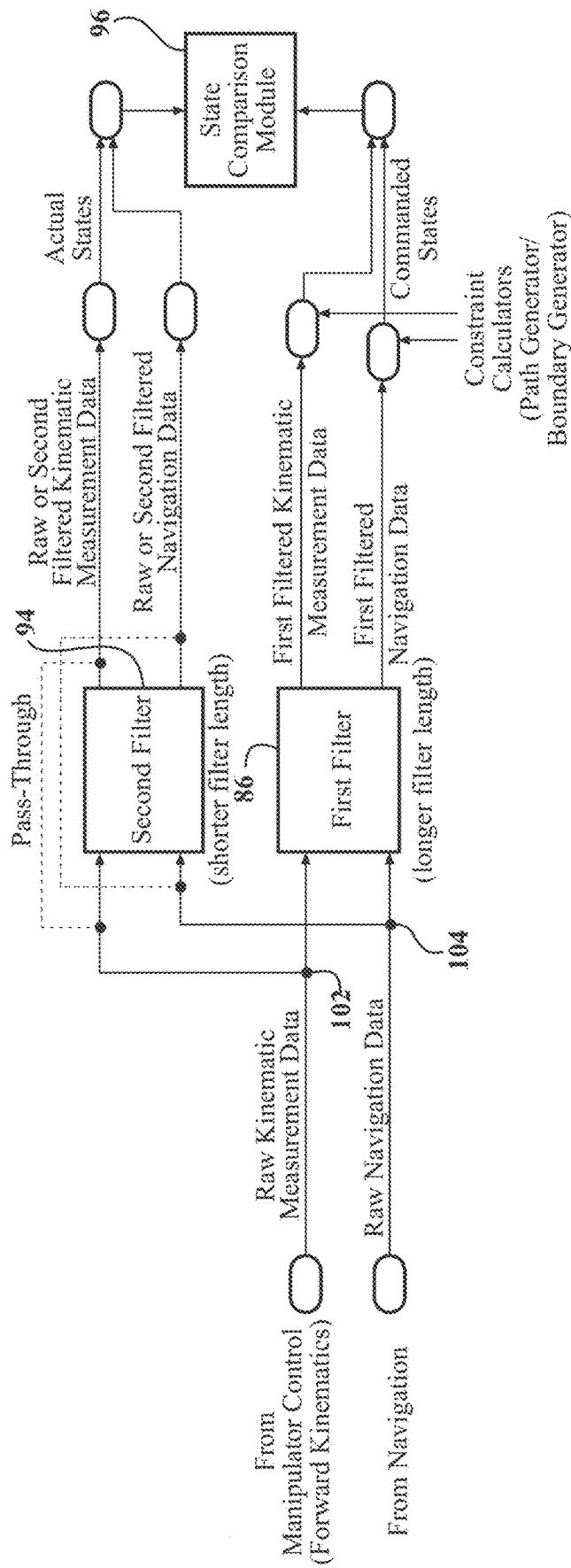


FIG. 4

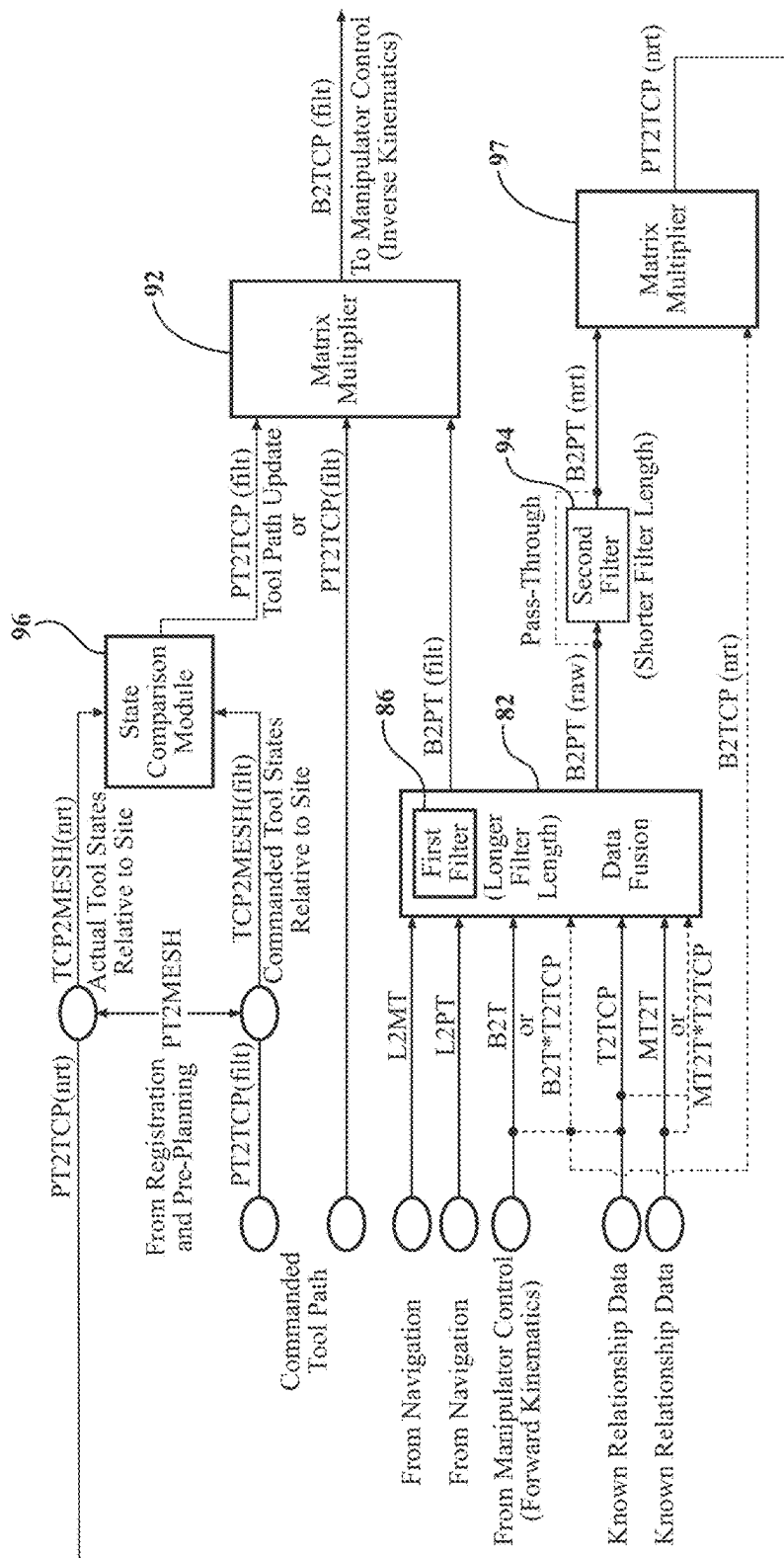


FIG. 5

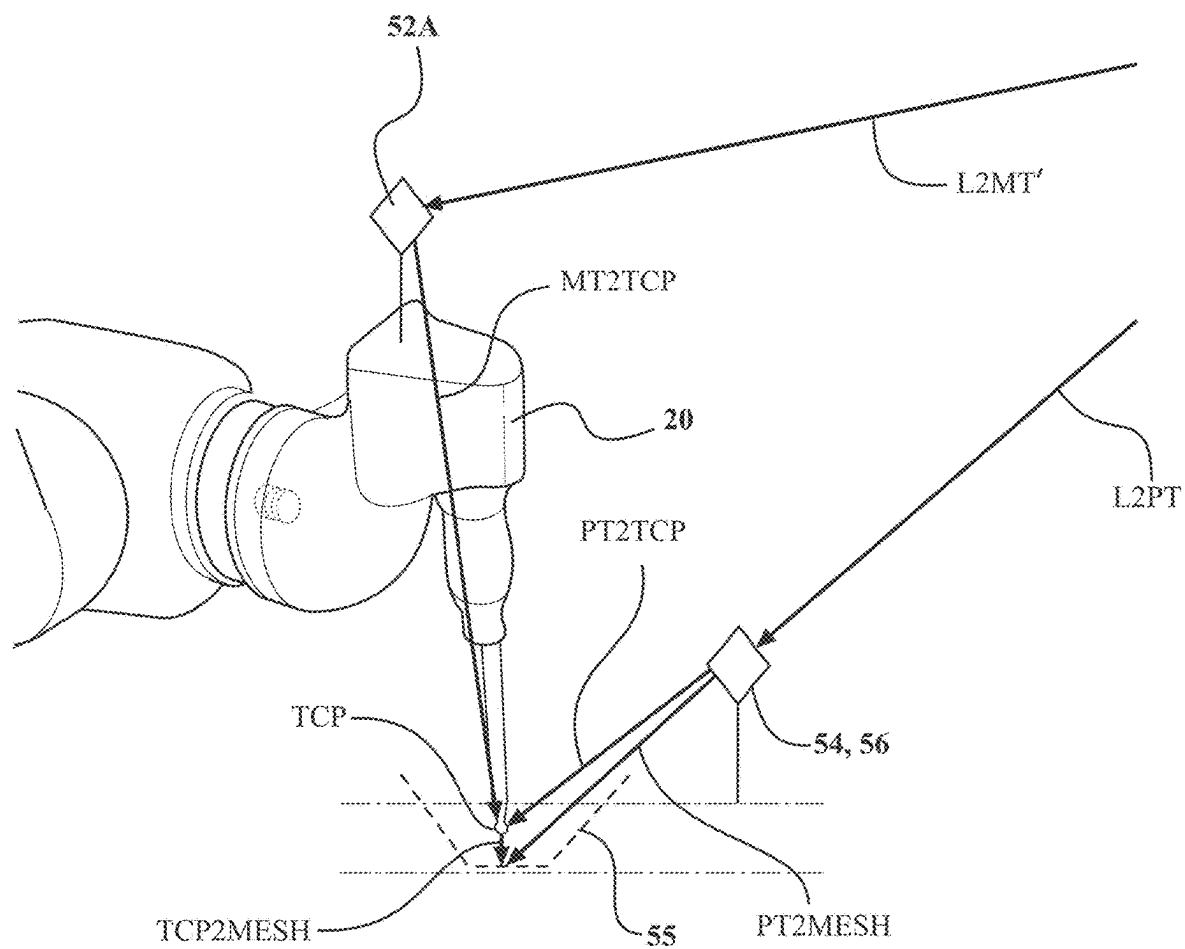


FIG. 6

FIG. 7

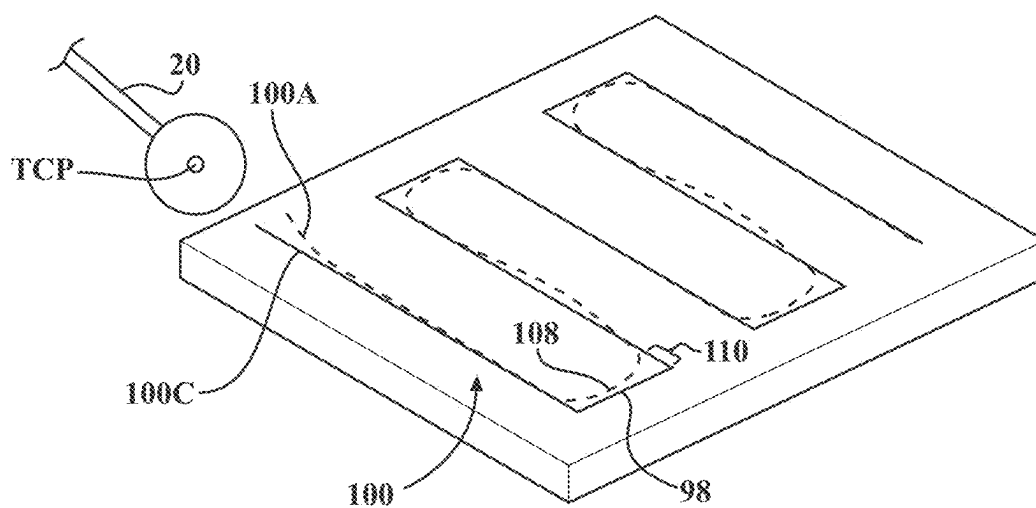


FIG. 8

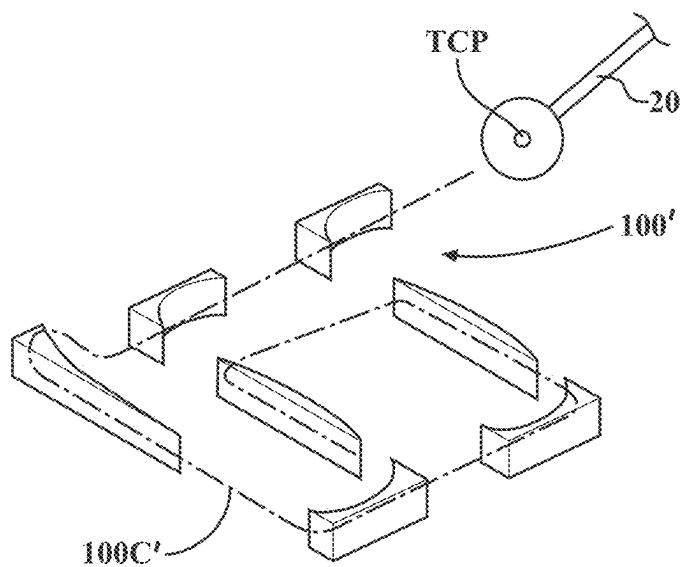
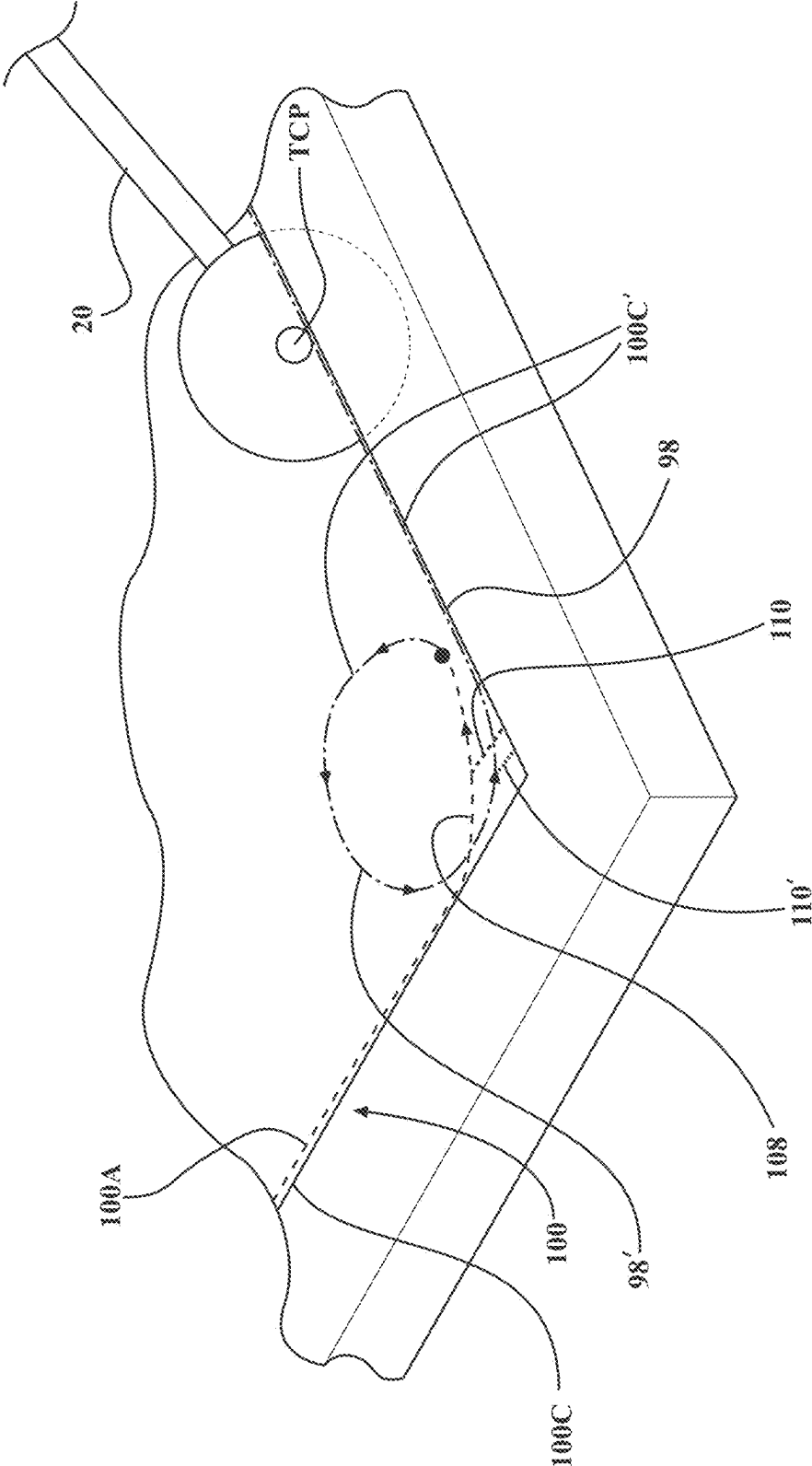


FIG. 9



**TECHNIQUES FOR MODIFYING TOOL
OPERATION IN A SURGICAL ROBOTIC
SYSTEM BASED ON COMPARING ACTUAL
AND COMMANDED STATES OF THE TOOL
RELATIVE TO A SURGICAL SITE**

**CROSS-REFERENCE TO RELATED
APPLICATIONS**

[0001] The subject application is a continuation of U.S. patent application Ser. No. 18/381,658, filed Oct. 19, 2023, which is a continuation of U.S. patent application Ser. No. 17/534,499, filed Nov. 24, 2021, issued as U.S. Pat. No. 11,850,011, which is a continuation of U.S. patent application Ser. No. 15/840,278, filed Dec. 13, 2017, issued as U.S. Pat. No. 11,202,682, which claims priority to and all the benefits of U.S. Provisional Pat. App. No. 62/435,254, filed on Dec. 16, 2016, the contents of each of the aforementioned applications being hereby incorporated by reference in their entirety.

TECHNICAL FIELD

[0002] The disclosure relates generally to techniques for modifying tool operation based on comparing actual and commanded states of the tool relative to a surgical site.

BACKGROUND

[0003] Robotic systems are commonly used to perform surgical procedures and typically include a robot comprising a robotic arm and an end effector coupled to an end of the robotic arm. The robotic system commands the end effector along a cutting path for engaging a surgical site. Often, a supplemental tracking system, such as optical localization, is utilized to track positioning of the robot and the surgical site. Kinematic data from the robot may be aggregated with supplemental data from the tracking system to update positioning of the robot along the commanded cutting path. Such aggregation is used to provide redundancy for the critical task of positioning the end effector and to improve accuracy by accounting for kinematic errors such as residual kinematic calibration error and link deflection.

[0004] Tracking systems often track the robot and the anatomy at the surgical site at much higher frequencies than the closed loop bandwidth of the robot's response. Tracking systems can respond in near-real time, whereas the robot arm is limited by inertia and available power. Moreover, anatomy movement can be faster than the robot can respond. As a result, updating positioning of the robot based on data from the tracking system is a delayed process. This delay helps to avoid undesirable effects, such as positive feedback.

[0005] Failure to account for the lag necessary to prevent positive feedback, the near real-time actual positions of the end effector, and fast movements of the anatomy cause cutting inaccuracies at the surgical site. The issue is worsened when subsequent commanded cutting paths are generated based on previous commanded cutting paths, wherein neither the previous nor the subsequent commanded cutting path account for the near real-time, actual positions of the end effector, thereby causing regenerative cutting errors.

[0006] As such, there is a need in the art for systems and methods for addressing at least the aforementioned problems.

SUMMARY

[0007] According to a first aspect, a surgical system is provided, which comprises: a manipulator configured to support and facilitate movement of a surgical tool along a tool path relative to a surgical site; and one or more controllers coupled to the manipulator and being configured to: determine commanded states of the surgical tool and actual states of the surgical tool relative to the tool path for a plurality of time steps; detect at least one deviation between the commanded states and the actual states of the surgical tool for at least one of the plurality of time steps; and respond to the at least one deviation by modification of one or both of: a feed rate of the surgical tool; and the tool path.

[0008] According to a second aspect, a method of operating a surgical system is provided, wherein the surgical system includes a manipulator to support and facilitate movement of a surgical tool along a tool path relative to a surgical site, and one or more controllers coupled to the manipulator, the method comprising the one or more controllers: determining commanded states of the surgical tool and actual states of the surgical tool relative to the tool path for a plurality of time steps; detecting at least one deviation between the commanded states and the actual states of the surgical tool for at least one of the plurality of time steps; and responding to the at least one deviation by modifying one or both of: a feed rate of the surgical tool; and the tool path.

[0009] The system and method determine near real-time, actual states of the surgical tool and/or tracker along the first path independent of the delay of the first filter. The system and method advantageously exploit raw or lightly (second) filtered raw kinematic measurement data and/or navigation data to modify operation of the surgical tool. Since the second filtered kinematic measurement data and/or navigation data is near instantaneous, the actual states of the surgical tool can be determined in near real time and faster than using the commanded (first filtered) states alone. The system and method acquire and utilize actual states of the surgical tool and/or tracker, which are faster than the delayed commanded states. Consequently, the actual and commanded states are compared to properly account for deviations. By doing so, the system and method increase path or cutting accuracy at the surgical site and reduce the possibility for regenerative cutting errors. The system and method may exhibit advantages other than those described herein.

BRIEF DESCRIPTION OF THE DRAWINGS

[0010] Advantages of the present invention will be readily appreciated as the same becomes better understood by reference to the following detailed description when considered in connection with the accompanying drawings wherein:

[0011] FIG. 1 is a perspective view of a robotic surgical system for manipulating a target tissue of a patient with a tool, according to one embodiment.

[0012] FIG. 2 is a block diagram of a controller for controlling the robotic surgical system, according to one embodiment.

[0013] FIG. 3 is a perspective view illustrating transforms between components of a manipulator and components of a navigation system of the robotic surgical system, according to one embodiment.

[0014] FIG. 4 is a simplified block diagram of techniques, implemented by the controller, for filtering and fusing data from the manipulator and the navigation system, according to one embodiment.

[0015] FIG. 5 is a detailed block diagram of techniques, implemented by the controller, for filtering and fusing data from the manipulator and the navigation system, according to one embodiment.

[0016] FIG. 6 is a perspective view illustrating transforms between a localizer, patient tracker, and manipulator tracker of the navigation system, a tool center point of the tool, and a virtual mesh associated with the target tissue, according to one embodiment.

[0017] FIG. 7 is a diagram, according to one embodiment, illustrating sample movement of the tool along a first path for removing a portion target tissue wherein deviations between commanded and actual states of the tool are represented.

[0018] FIG. 8 is a diagram illustrating sample movement of the tool along a subsequent path for removing portions of the target tissue remaining from FIG. 7.

[0019] FIG. 9 is a diagram illustrating sample movement of the tool along a path of movement and immediate correction of the path based on recognition of present deviations between commanded and actual states.

[0020] FIG. 10 is a diagram illustrating sample movement of the tool along a path of movement and proactively correction of the path based on recognition of past deviations between commanded and actual states.

DETAILED DESCRIPTION

I. Overview

[0021] Referring to the Figures, wherein like numerals indicate like or corresponding parts throughout the several views, a robotic surgical system 10 (hereinafter “system”) and method for operating the system 10 are shown throughout.

[0022] As shown in FIG. 1, the system 10 is a robotic surgical system for treating an anatomy (surgical site) of a patient 12, such as bone or soft tissue. In FIG. 1, the patient 12 is undergoing a surgical procedure. The anatomy in FIG. 1 includes a femur (F) and a tibia (T) of the patient 12. The surgical procedure may involve tissue removal or treatment. Treatment may include cutting, coagulating, lesioning the tissue, treatment in place of tissue, or the like. In some embodiments, the surgical procedure involves partial or total knee or hip replacement surgery. In one embodiment, the system 10 is designed to cut away material to be replaced by surgical implants, such as hip and knee implants, including unicompartamental, bicompartamental, multicompartamental, or total knee implants. Some of these types of implants are shown in U.S. Patent Application Publication No. 2012/0330429, entitled, “Prosthetic Implant and Method of Implantation,” the disclosure of which is hereby incorporated by reference. Those skilled in the art appreciate that the system 10 and method disclosed herein may be used to perform other procedures, surgical or non-surgical, or may be used in industrial applications or other applications where robotic systems are utilized.

[0023] The system 10 includes a manipulator 14. The manipulator 14 has a base 16 and plurality of links 18. A manipulator cart 17 supports the manipulator 14 such that the manipulator 14 is fixed to the manipulator cart 17. The

links 18 collectively form one or more arms of the manipulator 14. The manipulator 14 may have a serial arm configuration (as shown in FIG. 1) or a parallel arm configuration. In other embodiments, more than one manipulator 14 may be utilized in a multiple arm configuration. The manipulator 14 comprises a plurality of joints (J) and a plurality of joint encoders 19 located at the joints (J) for determining position data of the joints (J). For simplicity, only one joint encoder 19 is illustrated in FIG. 1, although it is to be appreciated that the other joint encoders 19 may be similarly illustrated. The manipulator 14 according to one embodiment has six joints (J1-J6) implementing at least six-degrees of freedom (DOF) for the manipulator 14. However, the manipulator 14 may have any number of degrees of freedom and may have any suitable number of joints (J) and redundant joints (J).

[0024] The base 16 of the manipulator 14 is generally a portion of the manipulator 14 that is stationary during usage thereby providing a fixed reference coordinate system (i.e., a virtual zero pose) for other components of the manipulator 14 or the system 10 in general. Generally, the origin of a manipulator coordinate system MNPL is defined at the fixed reference of the base 16. The base 16 may be defined with respect to any suitable portion of the manipulator 14, such as one or more of the links 18. Alternatively, or additionally, the base 16 may be defined with respect to the manipulator cart 17, such as where the manipulator 14 is physically attached to the cart 17. In a preferred embodiment, the base 16 is defined at an intersection of the axes of joints J1 and J2 (see FIG. 3). Thus, although joints J1 and J2 are moving components in reality, the intersection of the axes of joints J1 and J2 is nevertheless a virtual fixed reference point, which does not move in the manipulator coordinate system MNPL. The manipulator 14 and/or manipulator cart 17 house a manipulator computer 26, or other type of control unit.

[0025] A surgical tool 20 (hereinafter “tool”) couples to the manipulator 14 and is movable relative to the base 16 to interact with the anatomy in certain modes. The tool 20 is or forms part of an end effector 22 in certain modes. The tool 20 may be grasped by the operator. One exemplary arrangement of the manipulator 14 and the tool 20 is described in U.S. Pat. No. 9,119,655, entitled, “Surgical Manipulator Capable of Controlling a Surgical Instrument in Multiple Modes,” the disclosure of which is hereby incorporated by reference. The manipulator 14 and the tool 20 may be arranged in alternative configurations. The tool 20 can be like that shown in U.S. Patent Application Publication No. 2014/0276949, filed on Mar. 15, 2014, entitled, “End Effector of a Surgical Robotic Manipulator,” hereby incorporated by reference.

[0026] The tool 20 includes an energy applicator 24 designed to contact the tissue of the patient 12 at the surgical site. The energy applicator 24 may be a drill, a saw blade, a bur, an ultrasonic vibrating tip, or the like. The tool 20 comprises a TCP, which in one embodiment, is a predetermined reference point defined at the energy applicator 24. The TCP has known position in its own coordinate system. In one embodiment, the TCP is assumed to be located at the center of a spherical of the tool 20 such that only one point is tracked. The TCP may relate to a bur having a specified diameter. The TCP may be defined according to various manners depending on the configuration of the energy applicator 24.

[0027] Referring to FIG. 2, the system 10 includes a controller 30. The controller 30 includes software and/or hardware for controlling the manipulator 14. The controller 30 directs the motion of the manipulator 14 and controls a state (position and/or orientation) of the tool 20 with respect to a coordinate system. In one embodiment, the coordinate system is the manipulator coordinate system MNPL, as shown in FIG. 1. The manipulator coordinate system MNPL has an origin located at any suitable pose with respect to the manipulator 14. Axes of the manipulator coordinate system MNPL may be arbitrarily chosen as well. Generally, the origin of the manipulator coordinate system MNPL is defined at the fixed reference point of the base 16. One example of the manipulator coordinate system MNPL is described in U.S. Pat. No. 9,119,655, entitled, "Surgical Manipulator Capable of Controlling a Surgical Instrument in Multiple Modes," the disclosure of which is hereby incorporated by reference.

[0028] As shown in FIG. 1, the system 10 further includes a navigation system 32. One example of the navigation system 32 is described in U.S. Pat. No. 9,008,757, filed on Sep. 24, 2013, entitled, "Navigation System Including Optical and Non-Optical Sensors," hereby incorporated by reference. The navigation system 32 is configured to track movement of various objects. Such objects include, for example, the manipulator 14, the tool 20 and the anatomy, e.g., femur F and tibia T. The navigation system 32 tracks these objects to gather state information of each object with respect to a (navigation) localizer coordinate system LCLZ. Coordinates in the localizer coordinate system LCLZ may be transformed to the manipulator coordinate system MNPL, and/or vice-versa, using transformation techniques described herein.

[0029] The navigation system 32 includes a cart assembly 34 that houses a navigation computer 36, and/or other types of control units. A navigation interface is in operative communication with the navigation computer 36. The navigation interface includes one or more displays 38. The navigation system 32 is capable of displaying a graphical representation of the relative states of the tracked objects to the operator using the one or more displays 38. First and second input devices 40, 42 may be used to input information into the navigation computer 36 or otherwise to select/control certain aspects of the navigation computer 36. As shown in FIG. 1, such input devices 40, 42 include interactive touchscreen displays. However, the input devices 40, 42 may include any one or more of a keyboard, a mouse, a microphone (voice-activation), gesture control devices, and the like. The controller 30 may be implemented on any suitable device or devices in the system 10, including, but not limited to, the manipulator computer 26, the navigation computer 36, and any combination thereof.

[0030] The navigation system 32 also includes a navigation localizer 44 (hereinafter "localizer") coupled to the navigation computer 36. In one embodiment, the localizer 44 is an optical localizer and includes a camera unit 46. The camera unit 46 has an outer casing 48 that houses one or more optical sensors 50.

[0031] The navigation system 32 includes one or more trackers. In one embodiment, the trackers include a pointer tracker PT, one or more manipulator trackers 52, a first patient tracker 54, and a second patient tracker 56. In the illustrated embodiment of FIG. 1, the manipulator tracker 52 is firmly attached to the tool 20 (i.e., tracker 52A), the first

patient tracker 54 is firmly affixed to the femur F of the patient 12, and the second patient tracker 56 is firmly affixed to the tibia T of the patient 12. In this embodiment, the patient trackers 54, 56 are firmly affixed to sections of bone. The pointer tracker PT is firmly affixed to a pointer P used for registering the anatomy to the localizer coordinate system LCLZ. The manipulator tracker 52 may be affixed to any suitable component of the manipulator 14, in addition to, or other than the tool 20, such as the base 16 (i.e., tracker 52B), or any one or more links 18 of the manipulator 14. Those skilled in the art appreciate that the trackers 52, 54, 56, PT may be fixed to their respective components in any suitable manner.

[0032] Any one or more of the trackers may include active markers 58. The active markers 58 may include light emitting diodes (LEDs). Alternatively, the trackers 52, 54, 56 may have passive markers, such as reflectors, which reflect light emitted from the camera unit 46. Other suitable markers not specifically described herein may be utilized.

[0033] The localizer 44 tracks the trackers 52, 54, 56 to determine a state of each of the trackers 52, 54, 56, which correspond respectively to the state of the object respectively attached thereto. The localizer 44 provides the state of the trackers 52, 54, 56 to the navigation computer 36. In one embodiment, the navigation computer 36 determines and communicates the state the trackers 52, 54, 56 to the manipulator computer 26. As used herein, the state of an object includes, but is not limited to, data that defines the position and/or orientation of the tracked object or equivalents/derivatives of the position and/or orientation. For example, the state may be a pose of the object, and may include linear data, and/or angular velocity data, and the like.

[0034] Although one embodiment of the navigation system 32 is shown in the Figures, the navigation system 32 may have any other suitable configuration for tracking the manipulator 14 and the patient 12. In one embodiment, the navigation system 32 and/or localizer 44 are ultrasound-based. For example, the navigation system 32 may comprise an ultrasound imaging device coupled to the navigation computer 36. The ultrasound imaging device images any of the aforementioned objects, e.g., the manipulator 14 and the patient 12, and generates state signals to the controller 30 based on the ultrasound images. The ultrasound images may be 2-D, 3-D, or a combination of both. The navigation computer 36 may process the images in near real-time to determine states of the objects. The ultrasound imaging device may have any suitable configuration and may be different than the camera unit 46 as shown in FIG. 1.

[0035] In another embodiment, the navigation system 32 and/or localizer 44 are radio frequency (RF)-based. For example, the navigation system 32 may comprise an RF transceiver coupled to the navigation computer 36. The manipulator 14 and the patient 12 may comprise RF emitters or transponders attached thereto. The RF emitters or transponders may be passive or actively energized. The RF transceiver transmits an RF tracking signal and generates state signals to the controller 30 based on RF signals received from the RF emitters. The navigation computer 36 and/or the controller 30 may analyze the received RF signals to associate relative states thereto. The RF signals may be of any suitable frequency. The RF transceiver may be positioned at any suitable location to track the objects using RF signals effectively. Furthermore, the RF emitters or tran-

sponders may have any suitable structural configuration that may be much different than the trackers 52, 54, 56 as shown in FIG. 1.

[0036] In yet another embodiment, the navigation system 32 and/or localizer 44 are electromagnetically based. For example, the navigation system 32 may comprise an EM transceiver coupled to the navigation computer 36. The manipulator 14 and the patient 12 may comprise EM components attached thereto, such as any suitable magnetic tracker, electro-magnetic tracker, inductive tracker, or the like. The trackers may be passive or actively energized. The EM transceiver generates an EM field and generates state signals to the controller 30 based upon EM signals received from the trackers. The navigation computer 36 and/or the controller 30 may analyze the received EM signals to associate relative states thereto. Again, such navigation system 32 embodiments may have structural configurations that are different than the navigation system 32 configuration as shown throughout the Figures.

[0037] Those skilled in the art appreciate that the navigation system 32 and/or localizer 44 may have any other suitable components or structure not specifically recited herein. Furthermore, any of the techniques, methods, and/or components described above with respect to the camera-based navigation system 32 shown throughout the Figures may be implemented or provided for any of the other embodiments of the navigation system 32 described herein. For example, the navigation system 32 may utilize solely inertial tracking or any combination of tracking techniques.

[0038] As shown in FIG. 2, the controller 30 further includes software modules. The software modules may be part of a computer program or programs that operate on the manipulator computer 26, navigation computer 36, or a combination thereof, to process data to assist with control of the system 10. The software modules include instructions stored in memory on the manipulator computer 26, navigation computer 36, or a combination thereof, to be executed by one or more processors of the computers 26, 36. Additionally, software modules for prompting and/or communicating with the operator may form part of the program or programs and may include instructions stored in memory on the manipulator computer 26, navigation computer 36, or a combination thereof. The operator interacts with the first and second input devices 40, 42 and the one or more displays 38 to communicate with the software modules. The user interface software may run on a separate device from the manipulator computer 26 and navigation computer 36.

[0039] The controller 30 includes a manipulator controller 60 for processing data to direct motion of the manipulator 14. In one embodiment, as shown in FIG. 1, the manipulator controller is implemented on the manipulator computer 26. The manipulator controller 60 may receive and process data from a single source or multiple sources. The controller 30 further includes a navigation controller 62 for communicating the state data relating to the femur F, tibia T, and manipulator 14 to the manipulator controller 60. The manipulator controller 60 receives and processes the state data provided by the navigation controller 62 to direct movement of the manipulator 14. In one embodiment, as shown in FIG. 1, the navigation controller 62 is implemented on the navigation computer 36. The manipulator controller 60 or navigation controller 62 may also communicate states of the patient 12 and manipulator 14 to the operator by displaying an image of the femur F and/or tibia

T and the manipulator 14 on the one or more displays 38. The manipulator computer 26 or navigation computer 36 may also command display of instructions or request information using the display 38 to interact with the operator and for directing the manipulator 14.

[0040] As shown in FIG. 2, the controller 30 includes a boundary generator 66. The boundary generator 66 is a software module that may be implemented on the manipulator controller 60. Alternatively, the boundary generator 66 may be implemented on other components, such as the navigation controller 62. The boundary generator 66 generates virtual boundaries 55 for constraining the tool 20, as shown in FIG. 3. Such virtual boundaries 55 may also be referred to as virtual meshes, virtual constraints, or the like. The virtual boundaries 55 may be defined with respect to a 3-D bone model registered to the one or more patient trackers 54, 56 such that the virtual boundaries 55 are fixed relative to the bone model. The state of the tool 20 is tracked relative to the virtual boundaries 55. In one embodiment, the state of the TCP is measured relative to the virtual boundaries 55 for purposes of determining when and where haptic feedback force is applied to the manipulator 14, or more specifically, the tool 20.

[0041] A tool path generator 68 is another software module run by the controller 30, and more specifically, the manipulator controller 60. The tool path generator 68 generates a path 100 for the tool 20 to traverse, such as for removing sections of the anatomy to receive an implant. One exemplary system and method for generating the tool path 100 is explained in U.S. Pat. No. 9,119,655, entitled, "Surgical Manipulator Capable of Controlling a Surgical Instrument in Multiple Modes," the disclosure of which is hereby incorporated by reference. In some embodiments, the virtual boundaries 55 and/or tool paths 100 may be generated offline rather than on the manipulator computer 26 or navigation computer 36. Thereafter, the virtual boundaries 55 and/or tool paths 100 may be utilized at runtime by the manipulator controller 60. Yet another software module in FIG. 2 is a state comparison module 96, the details of which are described below.

II. Data Fusion and Filtering for Determining Commanded States of the Tool Relative to the Surgical Site

[0042] As described above, the manipulator 14 and the navigation system 32 operate with respect to different coordinate systems, i.e., the manipulator coordinate system MNPL and the localizer coordinate system LCLZ, respectively. As such, in some embodiments, the controller 30 fuses data from the manipulator 14 and the navigation system 32 for controlling the manipulator 14 using the navigation system 32. To do so, the controller 30 utilizes data fusion techniques as described herein.

[0043] In general, the controller 30 acquires raw data of various transforms between components of the system 10. As used herein, the term "raw" is used to describe data representing an actual or true state of one or more components of the system 10 (e.g., base 16, tool 20, localizer 44, trackers 52, 54, 56) relative to at least another component(s) of the system 10, whereby the raw data is obtained near instantaneously (in near real time) from its respective source such that the raw data is unfiltered. The raw data is an unaltered or minimally processed measurement.

[0044] As used herein, the term “filtered” is used to describe raw data that is filtered according to a filter length and that represents a filtered state of one or more components of the system 10 relative to at least another component (s) of the system 10. The filtered data is delayed with respect to the near instantaneously obtained raw data due to application of the filter length in the filter. As will be described below, the raw data is ultimately filtered to control the manipulator 14. Additional details related to filtering are described below.

[0045] Each tracked component has its own coordinate system separate from the manipulator coordinate system MNPL and localizer coordinate system LCLZ. The state of each component is defined by its own coordinate system with respect to MNPL and/or LCLZ. Each of these coordinate systems has an origin that may be identified as a point relative to the origin of the manipulator coordinate system MNPL and/or the localizer coordinate system LCLZ. A vector defines the position of the origin of each of these coordinate systems relative to another one of the other coordinate systems. The location of a coordinate system is thus understood to be the location of the origin of the coordinate system. Each of these coordinate systems also has an orientation that, more often than not, is different from the coordinate systems of the other components. The orientation of a coordinate system may be considered as the relationship of the X, Y and Z-axes of the coordinate system relative to the corresponding axes of another coordinate system, such as MNPL and/or LCLZ.

[0046] Referring to FIGS. 3 and 6, the state of one component of the system 10 relative to the state of another component is represented as a transform (shown in the figures using arrows). In one embodiment, each transform is specified as a transformation matrix, such as a 4×4 homogeneous transformation matrix. The transformation matrix, for example, includes three unit vectors representing orientation, specifying the axes (X, Y, Z) from the first coordinate system expressed in coordinates of the second coordinate system (forming a rotation matrix), and one vector (position vector) representing position using the origin from the first coordinate system expressed in coordinates of the second coordinate system.

[0047] The transform, when calculated, gives the state (position and/or orientation) of the component from the first coordinate system given with respect to a second coordinate system. The controller 30 calculates/obtains and combines a plurality of transforms e.g., from the various components of the system 10 to control the manipulator 14, as described below.

[0048] As shown in FIG. 3, the transforms include the following: transform (B2T) between the base 16 and the tool 20, transform (MT2T) between the manipulator tracker 52 and the tool 20, transform (L2MT') between the localizer 44 and the manipulator tracker 52 on the tool 20, transform (L2MT'') between the localizer 44 and the manipulator tracker 52 at the base 16, transform (L2PT) between the localizer 44 and one or more of the patient trackers 54, 56, transform (MT2TCP) between the manipulator tracker 52 and the TCP, and transform (T2TCP) between the tool 20 and the TCP.

[0049] Referring to FIG. 6, additional transforms include transform (PT2TCP) between the one or more patient trackers 54, 56 and the TCP, transform (TCP2MESH) between

the TCP and the virtual boundary 55, and transform (PT2MESH) between the one or more patient trackers 54, 56 and the virtual boundary 55.

[0050] One exemplary system and method for obtaining the transforms of the various components of the system is explained in U.S. Pat. No. 9,119,655, entitled, “Surgical Manipulator Capable of Controlling a Surgical Instrument in Multiple Modes,” the disclosure of which is hereby incorporated by reference.

[0051] The output (e.g., values) of the transforms are regarded as raw data when obtained instantaneously (in near real time) and when unfiltered. Such raw data may be understood as being derived from a near transform, i.e., a near instantaneous determination of the state of one component of the system 10 relative to the state of another component. On the other hand, the output values of such transforms are regarded as filtered data when the values are filtered, such as for reasons described below.

[0052] The transforms are now described in detail. The controller 30 acquires raw kinematic measurement data relating to a state of the tool 20. The state of the tool 20 may be determined relative to the manipulator coordinate system MNPL. In some instances, the raw kinematic measurement data may relate to the state of the tool 20 relative to the base 16. The raw kinematic measurement data may be obtained from the manipulator controller 60. Specifically, as shown in FIG. 3, the controller 30 is configured to acquire the raw kinematic measurement data by acquiring one or more values of transform (B2T) between a state of the base 16 and the state of the tool 20. Here, the raw kinematic measurement data may be obtained from kinematic data of the manipulator 14. In particular, the controller 30 may acquire one or more values of the first transform (B2T) by applying a forward kinematic calculation to values acquired from the joint encoders 19. Thus, the state of the tool 20 can be determined relative to the manipulator coordinate system MNPL without intervention from the navigation system 32. In other words, the first transform (B2T) may be obtained irrespective of any measurements from the navigation system 32.

[0053] In FIG. 3, transform (B2T) is indicated by an arrow having an origin at the base 16 and extending to and having an arrowhead pointing to the tool 20. In one exemplary convention used throughout FIG. 3, the arrowhead points to the component having its state derived or specified relative to the component at the origin. Transform (B2T) may be determined using any suitable reference frames (coordinate systems) on the base 16 and the tool 20.

[0054] The controller 30 may further acquire known relationship data relating to the state of the manipulator tracker 52 relative to the tool 20. In general, the known relationship data may be derived from any known relationship between the manipulator tracker 52 and the tool 20. In other words, the manipulator tracker 52 and the tool 20 have a relationship that is known or calculatable using any suitable method. The manipulator tracker 52 and the tool 20 may be fixed or moving relative to each other. For example, the manipulator tracker 52 may be attached directly to the tool 20, as shown in FIG. 3. Alternatively, the manipulator tracker 52 may be attached to one of the links 18, which move relative to the tool 20. In general, the manipulator tracker 52 and the tool 20 are tracked by different techniques, i.e., by navigation data and kinematic measurement data, respectively. The known relationship data assists to bridge the kinematic

measurement data and the navigation data by aligning the manipulator tracker 52 and the tool 20 to a common coordinate system.

[0055] The known relationship data may be fixed (constant or static) or variable. In embodiments where the known relationship data is fixed, the known relationship data may be derived from calibration information relating to the manipulator tracker 52 and/or the tool 20. For example, the calibration information may be obtained at a manufacturing/assembly stage, e.g., using coordinate measuring machine (CMM) measurements, etc. The known relationship data may be obtained using any suitable method, such as reading the known relationship data from a computer-readable medium, an RFID tag, a barcode scanner, or the like. The known relationship data may be imported into system 10 at any suitable moment such that the known relationship data is readily accessible by the controller 30. In embodiments where the known relationship data is variable, the known relationship data may be measured or computed using any ancillary measurement system or components, such as additional sensors, trackers, encoders, or the like. The known relationship data may also be acquired after mounting the manipulator tracker 52 to the tool 20 in preparation for a procedure by using any suitable technique or calibration method.

[0056] Whether static or variable, the known relationship data may or may not be regarded as raw data, as described herein, depending on the desired technique for obtaining the same. In one embodiment, the controller 30 may acquire the known relationship data by acquiring one or more values of transform (MT2T) between the state of the manipulator tracker 52A and the state of the tool 20. Transform (MT2T) may be determined with respect to any suitable coordinate system or frame on the manipulator tracker 52 and the tool 20.

[0057] In other embodiments, the controller 30 may determine transform (MT2T) using any one or more of kinematic measurement data from the manipulator 14 and navigation data from the navigation system 32 such that known relationship data is not utilized. For example, transform (MT2T) may be calculated using one or more of raw kinematic measurement data relating to the state of the tool 20 relative to the manipulator coordinate system MNPL from the manipulator 14 and raw navigation data relating to the state of the tracker 52 relative to the localizer 44 from the navigation system 32. For example, the tool 20 may be rotated about its wrist to create a circular or spherical fit of the tool 20 relative to the manipulator tracker 52.

[0058] In some embodiments, it may be desirable to determine the state of the TCP relative to the manipulator coordinate system MNPL and/or localizer coordinate system LCLZ. For example, the controller 30 may further acquire known relationship data relating to the state of the tool 20 relative to the TCP by acquiring one or more values of transform (T2TCP), as shown in FIG. 3. Additionally, or alternatively, the controller 30 may acquire known relationship data relating to the state of the manipulator tracker 52A relative to the TCP by acquiring one or more values of transform (MT2TCP), as shown in FIG. 3. Transforms (T2TCP) and (MT2TCP) may be acquired using any of the aforementioned techniques described with respect to transform (MT2T). Transforms (T2TCP) and (MT2TCP) may be utilized to determine commanded states 98 of the TCP

relative to the surgical site, as well as actual states 108 of the same, as described in the subsequent section.

[0059] The controller 30 is further configured to acquire, from the navigation system 32, raw navigation data relating to the state of the manipulator tracker 52 relative to the localizer 44. The controller 30 may do so by acquiring one or more values of transform (L2MT') between the manipulator tracker 52A on the tool 20 and the localizer 44 and/or transform (L2MT'') between the manipulator tracker 52B at the base 16 and the localizer 44. Transforms (L2MT' or L2MT'') can be calculated using navigation data alone, irrespective of kinematic measurement data from the manipulator 14.

[0060] The transform (L2PT) between the localizer 44 and one or more of the patient trackers 54, 56 may be determined by the controller 30 by similar techniques and assumptions as described above with respect to transforms (L2MT' or L2MT''). Specifically, the localizer 44 is configured to monitor the state of one or more of the patient trackers 54, 56 and the controller 30 is configured to acquire, from the navigation system 32, raw navigation data relating to the state of the one or more of the patient trackers 54, 56 relative to the localizer 44.

[0061] Referring to FIG. 6, transform (PT2MESH) may be calculated between one or more of the patient trackers 54, 56 and the virtual boundary 55 associated with the anatomy of the patient 12 using registration techniques involving the navigation system 32 and the pointer (P). In one embodiment, the pointer (P) is tracked by the navigation system 32 via the pointer tracker (PT) and is touched to various points on a surface of the anatomy. The navigation system 32, knowing the state of the pointer (P), registers the state of the anatomy with respect to one or more of the patient trackers 54, 56. Alternatively, (PT2MESH) may be broken up into additional (intermediate) transforms that are combined to result in (PT2MESH). For example, transform (IMAGE2MESH) may correspond to implant placement (e.g., from surgical planning) relative to a pre-op image, acquired using techniques such as CT, MRI, etc., and transform (PT2IMAGE) may correspond to location of the one or more patient trackers 54, 56 relative to that same pre-op image (e.g., from registration). These intermediate transforms may be combined to obtain transform (PT2MESH). One exemplary system and method for registering the anatomy is explained in U.S. Pat. No. 9,119,655, entitled, "Surgical Manipulator Capable of Controlling a Surgical Instrument in Multiple Modes," the disclosure of which is hereby incorporated by reference.

[0062] In FIG. 6, two additional transforms are shown which relate to the TCP. Specifically, these transforms include transform (PT2TCP) between the one or more patient trackers 54, 56 and the TCP and transform (TCP2MESH) between the TCP and the virtual boundary 55. As will be described below, these transforms are utilized to determine actual and commanded states 98 of the tool 20 relative to the surgical site. Transforms (PT2TCP) and (TCP2MESH) may be determined using navigation data alone, or navigation data in combination with kinematic measurement data. Those skilled in the art appreciate that given the various components of the system 10, other transforms other than those described above may be utilized in the techniques described herein.

[0063] With the transforms identified, one simplified embodiment of the data fusion and filtering techniques is

illustrated in FIG. 4. As shown, the controller 30 acquires the raw kinematic measurement data, which in this embodiment, relates to kinematically derived states of the manipulator 14. In one example, the raw kinematic measurement data may relate to the state of the tool 20 relative to the base 16 or manipulator coordinate system MNPL, i.e., (B2T)). Additionally or alternatively, the raw kinematic measurement data may relate to a state of one or more of the links 18 relative to the base 16, a state of the tool 20 relative to one or more of the links 18, a state of one or more of the joints (J1-J6) relative to the base 16, a state of the tool 20 relative to one or more of the joints (J1-J6), a state of the TCP relative to any of the aforementioned components, or the like. The controller 30 may acquire this raw kinematic measurement data using forward kinematic calculations, and by using any suitable transform depending on which components of the manipulator 14 have states that are being tracked.

[0064] The controller 30 is also configured to acquire, from the navigation system 32, raw navigation data. The raw navigation data may relate to the state of the manipulator tracker 52 relative to the localizer 44 (L2MT', L2MT'') and/or data relating to the state of the one or more patient trackers 54, 56 relative to the localizer 44 (L2PT).

[0065] In FIG. 4, the raw kinematic measurement data and raw navigation data (i.e., raw data) is passed to a first filter 86. The first filter 86 applies a first filter length, to produce first filtered kinematic measurement data and first filtered navigation data, respectively. The first filtered measurement and navigation data are utilized to determine commanded states 98 of the tool 20 while commanding the tool 20 to move relative to the surgical site, e.g., along a tool path 100.

[0066] The first filter 86 is a digital temporal filter that filters the raw data. This filtering may occur in the time-domain. Filtering may be understood as performing a type of averaging over a time history of data. Filtering does not affect the update or measurement rate but rather the frequency of content of the output signal (e.g., how quickly or smoothly the output changes), yet still providing a new output for each sample. In general, the greater the filter length for the filter, the greater the filter latency (delay) and averaging. In other words, a greater filter length provides more time to take into account (or average) determinations of the raw data over time. Thus, the greater the filter length, the smoother the raw data is over time. As will be described below, this first filtered data is involved in the calculation of constraints and downstream control commands, ultimately used to control the manipulator 14. The first filter 86 may consequently result in spatial filtering by ultimately causing the manipulator 14 to lag (as compared with the second filtered data, described below) in the spatial domain.

[0067] The first filter 86 may be one or more of various types of filters. In one embodiment, the first filter 86 may be understood as averaging inputted data, or averaging a time history of data. For example, the first filter 86 may be an infinite impulse response (IIR) filter, a finite impulse response filter (FIR), a “boxcar” filter, or the like. In addition, the filter order and length or filter length may be chosen to meet requirements of the application. Generally, the filtering described herein applies to low pass-type filtering, however, other filter-types, such as band pass, high pass, or notch filtering may be utilized. The filter length takes into account the time history of the filter. Examples of a filter length include a “time constant” for IIR filters,

number of taps or coefficients (i.e., memory depth) for a FIR (finite impulse response) filter, or any parameter of a filter relating to the amount of depth of data that is processed or averaged. In addition, the filter order and length may be chosen to meet requirements of the application. Generally, the filtering described herein applies to low pass-type filtering, however, other filter-types, such as band pass, high pass, or notch filtering may be utilized.

[0068] The filter length of the first filter 86 may be expressed as a unit of time. For example, the filter length may be represented in milliseconds (ms) or seconds(s). In one embodiment, the first filter length is greater than or equal to 100 ms and less than or equal to 1000 ms. For example, the first filter length may be 1000 ms. In this example, for any given time step, the filtered relationship is based on the raw relationship determinations averaged over the previous 1000 ms relative to the given time step.

[0069] Filtering by the first filter 86 is performed on the raw data for two primary purposes, i.e., reducing noise and increasing system stability. If it were possible, using the raw data alone to control the system 10 would be preferred since doing so would give the fastest and most accurate response. However, filtering is needed because of practical limitations on the system 10. Such practical limitations include noise reduction and stability improvements by removal of positive feedback. The localizer 44 is capable of operating at a much higher bandwidth as compared to the manipulator 14. That is, the localizer 44 tracks poses of the trackers 52, 54, 56 faster than the manipulator 14 can respond. Controlling off the raw data alone causes instability of system 10 because the manipulator 14 must react to commanded movements including those arising from random signal variation (i.e., noise), which are provided at the rate of the localizer 44. For example, the manipulator 14 would have to respond to every variation in the raw data. Commanded movement occurring at a rate higher than the manipulator 14 can respond results in heat, audible noise, mechanical wear, and potentially resonance, which can cause system instability. Because the localization data feedback represents an outer positioning loop, it is important not to close this outer loop at a higher bandwidth than the manipulator 14 can respond, to avoid instability.

[0070] Filtering with the first filter 86 reduces the bandwidth of the outer positioning loop thereby accommodating the bandwidth limitations of the inner positioning loop of the manipulator 14. Through such filtering, noise is reduced and stability is improved by removal or reduction in positive feedback. The manipulator 14 is prevented from reacting to every minor change in the raw data. Otherwise, if the manipulator 14 had react to noisy data, the manipulator 14 may be susceptible to spatial overshoot of tool 20 along the tool path 100 (such as when turning corners). Such spatial overshoot may cause the tool 20 to overcut the anatomy contrary to best design practices of favoring undercutting rather than overcutting. Instead, filtering of the raw data causes the manipulator 14 to behave more smoothly and run more efficiently. Further, noise may be introduced into the system 10 through measurement error in the sensors (e.g., encoders, localization feedback data, etc.). Filtering limits overall noise to a threshold tolerable by the system 10.

[0071] FIG. 5 is a block diagram illustrating, in part, aspects of the data fusion techniques implemented by the controller 30 and as described herein. In this section, only those portions of FIG. 5 relating to generating commanded

states **98** of the tool **20** relative to the surgical site are described. As shown, the transforms (L2MT, L2PT) are provided from navigation data, transform (B2T) is provided from kinematic measurement data, and transforms (T2TCP, MT2T) are provided from known relationship data, as described above. As shown, transforms (B2T) and (T2TCP) may be combined from kinematic measurement data and known relationship data to form transform (BT2TCP) between the base **16** and the TCP. Similarly, transforms (MT2T) and (T2TCP) may be combined from known relationship data to form transform (MT2TCP) between the manipulator tracker **52** and the TCP.

[0072] The controller **30** combines any combination of these transforms from different sources at data fusion block **82**. The controller **30** may apply any suitable matrix multiplier at data fusion block **82**. The output of the data fusion block **82** is transform (B2PT) relative to the base **16** and one or more of the patient trackers **54, 56**. However, transform (B2PT) is filtered by the first filter **86**, and hence is identified in FIG. **5** using the abbreviation “filt” representing a filtered version of this transform. Filtered transform (B2PT) may be understood as representing first filtered states of the one or more patient trackers **54, 56** relative to the base **16**. The first filter **86** is shown within the data fusion block **82** in FIG. **5**. However, the first filter **86** may be applied at the output of the data fusion block **82** instead. Filtered transform (B2PT), which is based on pose data, is primarily or entirely a spatial relationship. However, the sequences of such pose data may also signify one or more relationships that are derived from spatial parameters, such as relationships with respect to velocity and/or acceleration of the respective components of the transform.

[0073] In one embodiment, transform (B2PT) is formed by combining transforms (B2T), (MT2T), (L2MT; localizer **44** to tool tracker **52A**) and (L2PT). Transforms (MT2T) and (L2MT) may be inverted to enable proper combination these transforms. In another embodiment, transform (B2PT) is formed by combining transforms (L2MT; localizer **44** to base tracker **52B**) and (L2PT). Those skilled in the art appreciate that transform (B2PT) may be formed using any other suitable combination of transforms from kinematic measurement, navigation, and/or known relationship data.

[0074] The one or more patient trackers **54, 56** are assumed to move during operation of the system **10**. Movement of the patient trackers **54, 56** may result from movement of a table on which the patient **12** rests, movement of the patient **12** generally, and/or local movement of the anatomy subject to the procedure. Movement may also occur from anatomy holder dynamics, cut forces affecting movement of the anatomy, and/or physical force applied to the anatomy by an external source, i.e., another person, or a collision with an object. As such, it is desirable to provide the first filter **86** or a different filter to transform (L2PT) to enable the manipulator **14** to track/respond to motion within practical limits needed for stability. Such filtering is utilized for many of the same reasons described above with respect to the first filter **86**, i.e., signal noise reduction and increasing system stability.

[0075] As shown in FIG. **5**, the controller **30** combines filtered transform (B2PT) and the filtered version of transform (PT2TCP) to produce filtered transform (B2TCP) between the base **16** and the TCP. The controller **30** produces this transform by utilizing matrix multiplier at block **92**. The controller **30** utilizes filtered transform (B2TCP) for con-

trolling the manipulator **14** using inverse kinematic calculations wherein the path generator **69** generates the tool path **100** based on the filtered transform (B2TCP) and such that the boundary generator **66** assesses the filtered transform (B2TCP) with respect to the virtual boundaries **55**. Mainly, filtered transform (B2PT) may be combined with filtered transform (B2TCP) to produce filtered transform (PT2TCP) between the one or more patient trackers **54, 56** and the TCP. As shown in FIG. **5**, filtered transform (PT2TCP) may be combined with transform (PT2MESH) from registration and pre-planning to produce filtered transform (TCP2MESH). Ultimately, filtered transform (TCP2MESH) represents command states of the tool **20**, and more specifically the TCP, relative to the surgical site.

III. Techniques for Determining Actual States of the Tool Relative to the Surgical Site and Comparing Actual States to Commanded States

[0076] In the embodiments of the techniques described above, the raw kinematic measurement and/or raw navigation data are filtered individually, or in combination, for determining commanded states **98** of the tool **20**. Notably, the raw kinematic measurement and raw navigation data remain available prior to being filtered in FIG. **4**. This raw data is exploited for techniques for modifying operation of the tool **20**, as described in detail below.

[0077] In FIG. **4**, the raw data remain available and are duplicated or accessed and passed to the branch including the second filter **94**, leaving the first filtered measurement and/or navigation data in tact for control purposes downstream. The second filter **94** applies a second filter length that is shorter than the first filter length, to produce raw or second filtered kinematic measurement data and raw or second filtered navigation data, respectively. The raw or second filtered measurement and navigation data are utilized to determine actual states **108** of the tool **20** relative to the surgical site. The state comparison module **96** compares the actual states **108** and commanded states **98**. The second filtered data is produced specifically for comparison to the first filtered data to determine how to modify operation of the tool **20** based on the outcome of the comparison.

[0078] Utilizing the raw kinematic measurement and navigation data before filtering by the first filter **86** enables the controller **30** to record to memory a log of actual states **108** of the tool **20**. The controller **30** is configured to determine actual states **108** of the tool **20** while commanding the tool **20** to move relative to the surgical site, e.g., along the tool path **100**. As will be described below, the actual states **108** are determined using one or more of second filtered (or unfiltered) kinematic measurement data and second filtered (or unfiltered) navigation data. For any given time step during movement of the tool **20**, each commanded state **98** has a corresponding actual state **108**. As described above, the first filter **86** generally has a longer filter length to accommodate stability requirements of the outer position loop. Thus, these actual states **108** are in contrast to the commanded states **98**, which are otherwise delayed by filtering by the longer filter length of the first filter **84**. Accordingly, the term ‘actual’ as used herein is not intended to be limited solely to instantaneous states of the tool **108**. Said differently, the raw kinematic measurement data and/or raw navigation data is lightly filtered relative to the filtering of the first filtered measurement and/or navigation data. The

actual states **108** may be purely instantaneous (unfiltered) or more instantaneous (less filtered) than the commanded states **98**.

[0079] In one embodiment, the controller **30** is configured to utilize the raw kinematic measurement and/or navigation data (instead of the second filtered measurement and/or navigation data), e.g., from any one or more of the transforms, to determine the actual states **108**. The raw kinematic measurement and/or navigation data, in this embodiment, are filtered by the second filter **94** having a filter length of zero. If filtered by the filter length of zero, the raw kinematic measurement and/or navigation data “passes through” the second filter **94**, as shown in FIGS. **4** and **5**.

[0080] The raw data are filtered by the second filter **94** to remove high frequency noise or high frequency jitter from the raw signal. The amount of filtering (filter length) applied by the second filter **94** may be chosen such that it is long enough to remove the aforementioned high frequency noise/jitter in the raw signal, but short enough to represent the near real time states of the tool **20** to the extent practical. When filtered, it is generally understood that the filter length is greater than zero. In one example, the filter length of the second filter **94** is greater than 0 ms and less than or equal to 50 ms, as compared to, for example, the filter length of 1000 ms for the first filter **86**. The second filter **94** may have any configuration and may be any type of filter as those described above with respect to the first filter **86**.

[0081] The controller **30** is configured to filter any of the raw data with the second filter **94** (e.g., from any one or more of the transforms of FIGS. **3** and **6**) to arrive at the actual states **108**. However, in one specific embodiment, as shown in FIG. **5**, the actual states **108** are derived using the following technique. Any suitable combination of the transforms of FIG. **5** are combined in the data fusion block **82**. Another output of the data fusion block **82** is transform (B2PT) between the base **16** and one or more of the patient trackers **54**, **56**. However, transform (B2PT) is raw, and hence is identified in FIG. **5** using “raw” representing a raw version of this transform. Raw transform (B2PT) may be understood as representing raw states of the one or more patient trackers **54**, **56** relative to the base **16**. The raw transform (B2PT) then passes to the second filter **94**, which applies the shorter filter length of 0 (pass-through) or for example, between 0-50 ms (i.e., lightly filtered). Assuming the filter length is greater than 0, a near real time (i.e., “nrt”) transform (B2PT) is produced.

[0082] As shown in FIG. **5**, the controller **30** combines near real time transform (B2PT) and a near real time version of transform (BT2TCP), which is extracted from the transforms before input into the data fusion block **82**. The combination of these transforms produces a near real time transform (PT2TCP) between the one or more patient trackers **54**, **56** and the TCP. The controller **30** produces near real time transform (PT2TCP) by utilizing matrix multiplier at block **97**. Near real time transform (PT2TCP) may be combined with transform (PT2MESH) from registration and pre-planning to produce near real time transform (TCP2MESH). Ultimately, near real time transform (TCP2MESH) represents actual states **108** of the tool **20**, and more specifically the TCP, relative to the surgical site.

[0083] Those skilled in the art appreciate that various other combinations of transforms, other than those described herein may be utilized to determine actual states **108** of the tool **20**, and/or TCP relative to the surgical site, and that such

various combinations may depend on any factors, such as the location of the object being tracked, the desired coordinate system, or the like.

[0084] As described in the previous section, filtered transform (PT2TCP) is produced and represents commanded states **98** of the tool **20**, and more specifically the TCP, relative to the surgical site. The values from the near real time and filtered transform (TCP2MESH) are inputted into the comparison module **96**. The state comparison module **96** determines deviations **110** between the commanded states **98** and the actual states **108**. Consequently, the commanded states **98** are compared to the actual states **108** to properly account for actual states that may be different than commanded states of the tool **20** or TCP. For example, as described in the next section, the controller **30** determines tool path **100** or feed rate updates/modifications for the tool **20** based on an outcome of this comparison.

[0085] The deviations **110** may be represented with respect to any components of the pose of the tool **20**. In one sense, the deviations **110** may be understood by a difference (subtraction) between the commanded and actual states **98**, **108**. These deviations **110** can be identified by the state comparison module **96**, which compares the underlying data respectively corresponding to the commanded and actual states **98**, **108**.

[0086] Deviations **110** between the commanded and actual states **98**, **108** may not always occur. For example, there may be situations where the state of the tool **20** or TCP is constant, enabling temporary alignment between the commanded and actual states **98**, **108**. However, more likely than not, such deviations **110** occur because of sudden or abrupt changes in movement of the tool **20** or TCP. In general, the more abrupt the change in movement of the tool **20** or TCP for any given time step, the greater the deviation **110** will be between the commanded and actual states **98**, **108**. Of course, the commanded and actual states **98**, **108** may have any relationship with respect to each other and may deviate according to any manner depending on factors such as the type of data being compared (e.g., measurement or navigation data) and the respective filter lengths of the first filter **86** and the second filter **94**, and the like.

[0087] Comparison between the commanded and actual states **98**, **108** over time may be executed according to various implementations. In one example, the deviations **110** are converted into respective positional and angular components. The state comparison module **96** may perform this conversion to analyze each of the components individually.

[0088] In some embodiments, the deviations **110**, or components thereof, may be taken “as-is” such that the state comparison module **96** accounts for an entirety of such deviations **110**. Alternatively, the controller **30** is configured to compare the deviations **110** to one or more predetermined thresholds. For example, the positional and angular components of the deviations **110** are compared to one or more thresholds. If the deviation **110** exceeds the threshold, the deviation **110** is accounted for by the controller **30** for purposes of modifying operation of the tool **20**.

[0089] In some instances, it may be undesirable to account for an entirety of the deviation **110** for any one or more of the positional and angular components. For example, the sensitivity of the threshold should be set such that only noticeable and/or meaningful deviations **110** exceed the threshold. In one example, the threshold should be greater than zero such that minor or negligible deviations **110** are

disregarded. The threshold for the positional and/or angular components may be chosen based on cutting guidelines for the system 10. For example, the threshold may be set according to a predetermined distance or range (e.g., 1 mm) such that there is some safety margin to prevent over cutting of the target tissue, but sensitive enough to detect meaningful deviations 110 between the commanded 98 and actual states 108. The threshold may be an upper threshold or a lower threshold and may have any suitable limit, minimum, maximum, range, standard deviation from profile, or other configuration.

[0090] The state comparison module 96 may be implemented by the manipulator controller 60, as shown in FIG. 2. The state comparison module 96 may comprise any suitable computer-executable instructions, algorithms, and/or logic for comparing the raw/second filtered data to the first filtered data.

IV. Techniques for Modifying Tool Operation Based on Comparing Actual and Commanded States of the Surgical Tool Relative to the Surgical Site

[0091] Based on an outcome or result of comparing commanded and actual states 98, 108 relative to the surgical site, the controller 30 dynamically modifies operation of the tool 20 relative to the surgical site. Such modification of tool 20 operation may be performed according to various techniques, but generally are focused on modifying the path of movement and/or the feed rate of the tool 20.

[0092] Although the tool 20 is subject to many of the techniques described herein, and it should be understood that because the TCP derived from the tool 20, the TCP similarly may be subject of these techniques, even when not explicitly stated.

[0093] Generally, the commanded states 98 are utilized to move the tool 20 relative to the surgical site. As shown in FIGS. 7-10, for example, such movement of the tool 20 may be along a commanded first path 100C.

[0094] To implement such modification, in one embodiment, the controller 30 determines a subsequent (follow-up) path 100' for the tool 20 to account for the deviations 110 between the commanded and actual states 98, 108. That is, the controller 30 provides a subsequent correction of the first path 100.

[0095] FIG. 7 is a diagram illustrating one example of the commanded and actual states 98, 108 of the tool 20 along the first path 100 with respect to time. In this example, the first path 100 is a cutting path for manipulating a target tissue at the surgical site. The tool 20 is commanded to move along the first path 100 for removing a first section of the target tissue. As shown, the tool 20 is commanded to move along the commanded first path 100C according to the commanded states 98. The commanded first path 100C is defined by a combination of all commanded states 98 with respect to time. However, because the commanded states 98 are derived from first filtered data, the tool 20 does not completely follow the commanded first path 100C. Instead, the tool 20 follows the actual states 108 as shown in FIG. 7, which are determined based on raw or second filtered data. In doing so, the tool 20 slightly deviates from the commanded first path 100C and follows an actual first path 100A, which is defined by a combination of all actual states 108 with respect to time. Here, the deviations 110 between the commanded and actual states 98, 108 over time are

represented in FIG. 7 by a variable gap between the commanded and actual first paths 100C, 100A.

[0096] In FIG. 7, it has been demonstrated that the tool 20 follows the actual first path 100A instead of the commanded first path 100C. As a result, the tool 20 removes the first section of the target tissue as defined by the actual first path 100A rather than by the commanded first path 100C. If the system 10 proceeded on the basis that the tool 20 followed the commanded first path 100C alone, then the system 10 may falsely assume that the tool 20 removed the first section of tissue as commanded and as desired. However, FIG. 7 demonstrates that this is not the case. Specifically, certain peaks or uncut portions of the first section may remain because of the deviations 110. For simplicity, these peaks or uncut portions left over from the first section are referred to as the second section, which are illustrated in FIG. 8. In this specific example, the commanded first path 100C alone may be suitable for removing a “bulk” portion of the target tissue. However, in this example, the commanded first path 100C alone may be inadequate for “fine” removal of the residual target tissue.

[0097] As such, as shown in FIG. 8, the controller 30 generates the second path 100' as a follow-up path to account for the deviations 110 between the commanded and actual states 98, 108. In other words, the second path 100' is designed for more accurately or “finely” removing the target tissue, and more specifically, the second section left behind after commanding the tool 20 to move along the commanded first path 100C.

[0098] In one example, the second path 100' may be generated similarly to the first path 100 in that the controller 30 may determine (second) commanded states 98' for moving the tool 20 along a second commanded path 100C'. As such, any of the details described above with respect to generating of the first path 100 may apply to the second path 100'. However, even if commanded, the commanded second path 100C' is different than the commanded first path 100C in that the commanded second path 100C' accounts for the deviations 110 between the commanded and actual states 98, 108, whereas the commanded first path 100C does not. For this reason, the commanded second path 100C' in FIG. 8 follows a different route than the commanded first path 100C in FIG. 7.

[0099] The second path 100' may also be generated when the TCP is tracked to determine the deviations 110. In this example, a solid body model of the tissue, which is removed based on data from the actual states 108, may be utilized to determine what needs to be removed in second path 100'. The diameter of the TCP may be taken into account to determine what was actually removed from the surgical site. In one embodiment, if there are any deviations 110 between the commanded and actual states 98, 108 of the TCP, but the commanded and actual states 98, 108 overlap in a way that the TCP removes all the tissue from its actual states 108, such deviations 110 from the commanded states 98 may be disregarded to increase efficiency of the second path 100' and to avoid cutting when the tissue has already been removed.

[0100] The techniques described above for comparing the commanded and actual states 98, 108 from the first path 100 may be similarly applied to the commanded and actual states 98', 108' from the second path 100' to generate yet another path, e.g., a third path. Through this iterative process, any number of paths may be generated, thereby gradually

removing the target tissue until a suitable state of the target tissue is achieved. In one example, this iterative process may be understood in that each currently generated path is designed to remove target tissue according to a level of accuracy that is greater than a preceding generated path. Said differently, the deviations **110** between commanded and actual states **98**, **108** for any current path should have magnitudes being less than the deviations **110** between commanded and actual states **98**, **108** for the preceding path. **[0101]** Hence, in this “follow-up” or “clean-up” path embodiment, the error, i.e., the deviations between the commanded and actual bone surfaces (derived from transform between near real time capture of TCP path and commanded TCP path) are detected and undercut errors (predominant) are corrected with the subsequent tool path **100'** pass or passes until the residual error is within a pre-determined tolerance.

[0102] Although the technique of this embodiment has specific benefits, there may be drawbacks. For example, it will be apparent to the user that deviations **110** are occurring and corrections of such deviations **100** take time. Further, since most deviations **110** are likely to occur in corners or over disparate places on the cut surface, there is wasted time as the tool **20** “air cuts” from undercut area to undercut area. Additionally, if the second path **100'** is not performed until the end of machining, early undercut errors may be amplified due to “regenerative cutting error” since undercut areas will impose greater tool forces than in non-undercut areas, thereby causing a greater undercut on the next pass, i.e., positive feedback. The next embodiment addresses some of these setbacks.

[0103] In another embodiment as shown in FIG. 9, the controller **30**, based on the outcome of comparing the commanded and actual states **98**, **108**, immediately modifies operation of the tool **20** along the path **100** to account for the deviations **110**. This may be done, for example, by immediately altering the path **100**. Alternatively, or additionally, the controller **30** may immediately alter a feed rate of the tool **20**, as described below.

[0104] In the example of FIG. 9, a single tool path **100** is shown and as compared with FIG. 8, there is no subsequent tool path **100'**. Here, the tool **20** follows the commanded path **100C**, and actual states **108** of the tool **20** deviate from the commanded states **108** near a corner thereby causing deviations **110**, which produce an undercut. Upon immediately recognizing these deviations **110**, the controller **30** generates an updated commanded tool path **100C'** with updated commanded states **98'**. This immediate updating occurs at a point in time represented by a dot on the commanded tool path **100C**. The updated commanded tool path **100C'** loops back around with a localized clean up pass, thereby minimizing deviations **110'**. In FIG. 9, the updated commanded tool path **100C'** may continue along the originally commanded path **100C** or any other suitable updated commanded tool path **100C'**.

[0105] Using such “immediate” correction, the undercut is corrected before the remainder of the tool path **100** is executed. Due to the need for the first filter **86** to prevent positive feedback in the machining control loops, actions to address the undercut deviations **110** must occur, at a minimum, after the filter length of the first filter **86**. One exception to this is to slow down the feed rate of the tool **20** along the tool path **100**, which may be done in near real time (within the acceleration limits of the manipulator **14**). As

soon as the undercut deviation **110** is recognized, the commanded speed can be reduced. This action alone will often largely mitigate undercut deviation **110** because such errors are often caused by increases in machining force due to bone density increases or movement of the bone away from the tool **20**. Any undercut occurring during the transient will be minimized. When the deviation **110** falls below a tolerance threshold, the initial undercut error is then corrected with the localized cleanup pass, thereby removing the potential for regenerative cutting error development.

[0106] One method of addressing the initial undercut deviation **110** is to reverse the direction of feed and iteratively traverse a location of the undercut deviation **110** until the undercut is removed. This may be done with or without the aforementioned immediate feed rate slowdown, such as when the undercut deviation **110** is reduced below the tolerance threshold. That is, the undercut is sensed, but not acted upon until after the situation causing the undercut has ended. For example, large actuator accelerations commanded when turning a sharp corner at a high feed rate may not be achievable by the system **10**, resulting in an undercut. Upon stabilizing on a subsequent low radius or straight area, the system **10** would sense that undercutting has stopped. The direction of feed would then reverse to go back along the tool path **100** to address the undercut, most likely at a lower feed rate. Feed rate may be ramped down and/or the re-transited path iterated until the undercut deviation **110** is reduced to the tolerance threshold.

[0107] In a situation where the tool path **100** is creating a pocket several times greater than the TCP diameter, a more sophisticated method of addressing the undercut deviation **110** would be to circle back to the undercut location using a circle having a radius, which the system **10** can follow with low error given its feed rate. In some instances, however, the circular/helical path milling may only be used to address undercut deviation **110**, and then the original tool path **100** would be resumed until the next undercut deviation **110** is sensed.

[0108] In a third embodiment, as shown in FIG. 10, the controller **30**, based on the outcome of comparing the commanded and actual states **98**, **108**, proactively modifies operation of the tool **20** along the path **100** to account for the deviations **110**. This may be done, for example, by proactively altering the path **100**. Alternatively, or additionally, the controller **30** may proactively alter the feed rate of the tool **20**, as described below.

[0109] Once again, in the example of FIG. 10, a single tool path **100** is shown and as compared with FIG. 8, there is no subsequent tool path **100'**. Here, the tool **20** follows the commanded path **100C**, and actual states **108** of the tool **20** deviate from the commanded states **108** near a first corner thereby causing deviations **110**, which produce the undercut. Upon immediately recognizing these deviations **110**, the controller **30** proactively generates the commanded tool path **100C'**. This proactive updating occurs at a point in time represented by the present location of the TCP in FIG. 10. The proactively generated and updated commanded tool path **100C'** is configured to minimize deviations **110'** at a second corner (as compared to the deviations **110** from the first corner). Thus, the controller **30**, in a sense, predicts future undercuts and modifies operation of the tool **20** accordingly. In FIG. 10, the proactively updated com-

manded tool path **100C'** may continue along the originally commanded path **100C** or any other suitable updated commanded tool path **100C'**.

[0110] In proactive correction, the system **10** learns from the prior undercut deviations **110** and adjusts the feed rate and/or tool path accordingly before similar deviations **110** can occur, thereby avoiding the need for subsequent correction. Due to the high variation in bone density, the preferred implementation of proactive correction is reduction in feed rate. Tool path corrections would need to be approached conservatively to avoid potential overcorrection or overcut “correction” error.

[0111] In this embodiment, the threshold value to proactively correct deviations **110** may be variable. For example, the threshold value may be dependent on whether the machining is a roughing pass or finishing pass. Alternatively, or additionally, the threshold value may be dependent on the function and criticality of the feature being machined. For example, lower undercut errors would likely be tolerable in the middle 2/3rds of a surface intended for a press fit interface. This is since undercuts in this region would result in rocking of the implant, which could lead to poor fixation and/or alignment. Larger undercuts would be allowable in the outer portion since bone is not strictly rigid and, within localized areas, highpoints can compress and adapt to the implant upon impaction.

[0112] The controller **30** may use any of the above described techniques individually, or in combination to modify operation of the tool **20** to account for deviations **110** between the commanded and actual states **20**.

[0113] Additionally, it may be desirable to associate any of the aforementioned first and second paths **100**, **100'** to certain modes of operation for the system **10**. For example, the system **10** may enable the manipulator **14** to interact with the site using manual and semi-autonomous modes of operation. An example of the semi-autonomous mode is described in U.S. Pat. No. 9,119,655, entitled, “Surgical Manipulator Capable of Controlling a Surgical Instrument in Multiple Modes,” the disclosure of which is hereby incorporated by reference. In the semi-autonomous mode, the manipulator **14** directs movement of the tool **20** and, in turn, the energy applicator **24** at the surgical site. In one embodiment, the controller **30** models the tool **20** and/or energy applicator **24** as a virtual rigid body and determines forces and torques to apply to the virtual rigid body to advance and constrain the tool **20** and/or energy applicator **24** along any of the first and second paths **100**, **100'** in the semi-autonomous mode. Movement of the tool **20** in the semi-autonomous mode is constrained in relation to the virtual constraints generated by the boundary generator **66** and/or path generator **69**.

[0114] In the semi-autonomous mode, the manipulator **14** is capable of moving the tool **20** free of operator assistance. Free of operator assistance may mean that an operator does not physically contact the tool **20** to apply force to move the tool **20**. Instead, the operator may use some form of control to remotely manage starting and stopping of movement. For example, the operator may hold down a button of a remote control to start movement of the tool **20** and release the button to stop movement of the tool **20**. Alternatively, the operator may press a button to start movement of the tool **20** and press a button to stop movement of the tool **20**.

[0115] Alternatively, the system **10** may be operated in the manual mode. Here, in one embodiment, the operator manu-

ally directs, and the manipulator **14** controls, movement of the tool **20** and, in turn, the energy applicator **24** at the surgical site. The operator physically contacts the tool **20** to cause movement of the tool **20**. The manipulator **14** monitors the forces and torques placed on the tool **20** by the operator in order to position the tool **20**. A sensor that is part of the manipulator **14**, such as a force-torque transducer, measures these forces and torques. In response to the applied forces and torques, the manipulator **14** mechanically moves the tool **20** in a manner that emulates the movement that would have occurred based on the forces and torques applied by the operator. Movement of the tool **20** in the manual mode is also constrained in relation to the virtual constraints generated by the boundary generator **66** and/or path generator **69**.

[0116] For the “subsequent path” technique of FIGS. 7 and 8, the controller **30**, in one example, commands movement of the tool **20** along the first path **100** according to the manual mode and commands movement of the tool **20** along the second path **100'** according to the semi-autonomous mode. For example, it may be desirable to use the manual mode to control the tool **20** along the first path **100** for rough or bulk manipulation of the target tissue. In other words, the desire may be to quickly, but less accurately, remove large sections of the target tissue in the manual mode. Such bulk manipulation may result in relatively large deviations **110** between the commanded and actual states **98**, **108**. Accordingly, the semi-autonomous mode may be utilized to account for deviations **110** resulting from manual manipulation by commanding the tool **20** along the second path **100'**. This scenario provides an automated and highly accurate follow-up or clean-up after manual manipulation.

[0117] For the “subsequent path” technique, the controller **30** may alternatively command movement of the tool **20** along both the first and second paths **100**, **100'** according to the semi-autonomous mode. For example, it may be desirable to use the semi-autonomous mode to control the tool **20** along the first path **100** for rough or bulk manipulation of the target tissue. In other words, the desire may be to quickly, but less accurately remove large sections of the target tissue. In one example, rough-cut paths may be designed for the most efficient bulk removal of material given the capability and workspace stability of the manipulator **14**, without particular regard for accuracy. Thereafter, the semi-autonomous mode may again be utilized to account for deviations **110** from the first iteration of semi-autonomous manipulation by commanding the tool **20** along the second path **100'**. Using the semi-autonomous mode in this fashion provides an iterative process for removing the target tissue, as described above. That is, any number of follow-up paths may be generated, thereby gradually removing the target tissue and gradually reducing the deviations **110** between commanded and actual states **98**, **108** until a suitable state or threshold for the target tissue is achieved.

[0118] In other embodiments of this technique, the controller **30** is configured to command movement of the tool **20** along both the first and second paths **100**, **100'** according to the manual mode, in accordance with the techniques described above. Those skilled in the art appreciate that the controller **30** may command movement of the tool **20** along the first and second paths **100**, **100'** according to any other modes of operation and for other reasons not specifically recited herein.

[0119] For any of the embodiments shown in FIGS. 7-10, the system 10 may enable switching between the manual mode and the semi-autonomous mode at any time, and for any tool path. In one embodiment, such switching occurs in response to manual input. For example, the operator may use any suitable form of control to manage, e.g., remotely, which mode should be active. Alternatively, switching may be implemented autonomously in response to certain events or conditions. For example, the controller 30 may determine that the requisite amount of tissue has been removed in the manual mode and switch to the semi-autonomous mode in response. The controller 30 may further enable switching for the second tool path 100', to immediately correct the original tool path 100 or in anticipation of proactive correction of the original tool path 100. Furthermore, switching may occur based on analysis of the deviations 110 with respect to the threshold tolerance. Those skilled in the art appreciate that switching between manual and semi-autonomous modes may be performed according to other methods not explicitly described herein.

[0120] Several embodiments have been described in the foregoing description. However, the embodiments discussed herein are not intended to be exhaustive or limit the invention to any particular form. The terminology, which has been used, is intended to be in the nature of words of description rather than of limitation. Many modifications and variations are possible in light of the above teachings and the invention may be practiced otherwise than as specifically described.

[0121] The many features and advantages of the invention are apparent from the detailed specification, and thus, it is intended by the appended claims to cover all such features and advantages of the invention which fall within the true spirit and scope of the invention. Further, since numerous modifications and variations will readily occur to those skilled in the art, it is not desired to limit the invention to the exact construction and operation illustrated and described, and accordingly, all suitable modifications and equivalents may be resorted to, falling within the scope of the invention.

What is claimed is:

1. A surgical system comprising:
 - a manipulator configured to support and facilitate movement of a surgical tool along a tool path relative to a surgical site; and
 - one or more controllers coupled to the manipulator and being configured to:
 - determine commanded states of the surgical tool and actual states of the surgical tool relative to the tool path for a plurality of time steps;
 - detect at least one deviation between the commanded states and the actual states of the surgical tool for at least one of the plurality of time steps; and
 - respond to the at least one deviation by modification of one or both of: a feed rate of the surgical tool; and the tool path.
2. The surgical system of claim 1, wherein the one or more controllers to:
 - compare the at least one deviation to a threshold, wherein the threshold is at least one of:
 - a minimum, a maximum, a range, or a standard deviation;
 - determine that the at least one deviation exceeds the threshold; and
 - respond to the at least one deviation in response to determining that the at least one deviation exceeds the threshold.

3. The surgical system of claim 1, wherein the one or more controllers respond to the at least one deviation by immediate modification of one or both of: the feed rate of the surgical tool; and the tool path.

4. The surgical system of claim 1, wherein the one or more controllers respond to the at least one deviation by reduction of the feed rate of the surgical tool.

5. The surgical system of claim 1, wherein the one or more controllers respond to the at least one deviation by modification of the tool path to include a follow-up tool path that returns relative to the at least one deviation to address the at least one deviation.

6. The surgical system of claim 1, wherein the one or more controllers respond to the at least one deviation by reversal of a direction of the feed rate to enable the surgical tool to go back along the tool path.

7. The surgical system of claim 1, wherein the one or more controllers further respond to the at least one deviation by being configured to generate a new tool path for the surgical tool.

8. The surgical system of claim 1, wherein the one or more controllers are further configured to predict, based on the at least one deviation, at least one future deviation between future commanded states and future actual states of the surgical tool.

9. The surgical system of claim 8, wherein the one or more controllers are configured to proactively modify the tool path to account for the future deviation.

10. The surgical system of claim 8, wherein the one or more controllers are configured to proactively modify the feed rate of the surgical tool to account for the future deviation.

11. The surgical system of claim 1, wherein the one or more controllers are configured to respond to the at least one deviation by automatic modification of one or both of: the feed rate of the surgical tool; and the tool path.

12. The surgical system of claim 1, wherein the one or more controllers are configured to utilize data from the manipulator to determine the commanded states of the surgical tool and the actual states of the surgical tool.

13. The surgical system of claim 12, wherein the one or more controllers are configured to:

- filter the data from the manipulator according to a first filter length; and

- determine the commanded states of the surgical tool using the data filtered according to the first filter length.

14. The surgical system of claim 13, wherein the one or more controllers are further configured to:

- filter the data from the manipulator according to a second filter length being shorter than the first filter length; and

- determine the actual states of the surgical tool using the data filtered according to the second filter length.

15. The surgical system of claim 13, wherein the one or more controllers are further configured to:

- obtain the data from the manipulator, wherein the data is unfiltered; and

- determine the actual states of the surgical tool using the data that is unfiltered.

16. The surgical system of claim 1, wherein:

- the surgical site is a bone;

- the tool path is defined relative to the bone; and

- the surgical tool is a cutting bur configured to remove material from the bone.

17. The surgical system of claim **1**, wherein the one or more controllers are configured to:

facilitate movement of the surgical tool along the tool path in a semi-autonomous mode, and in the semi-autonomous mode, the manipulator directs movement of the surgical tool along the tool path free of operator assistance, wherein the tool path is predefined; and respond to the at least one deviation in the semi-autonomous mode.

18. The surgical system of claim **1**, wherein the one or more controllers are configured to:

facilitate movement of the surgical tool along the tool path in a manual mode, and in the manual mode, a user manually directs, and the manipulator controls, movement of the surgical tool along the tool path, wherein the tool path is defined by the user; and

respond to the at least one deviation in the manual mode.

19. A method of operating a surgical system, the surgical system including a manipulator to support and facilitate movement of a surgical tool along a tool path relative to a surgical site, and one or more controllers coupled to the manipulator, the method comprising the one or more controllers:

determining commanded states of the surgical tool and actual states of the surgical tool relative to the tool path for a plurality of time steps;

detecting at least one deviation between the commanded states and the actual states of the surgical tool for at least one of the plurality of time steps; and

responding to the at least one deviation by modifying one or both of: a feed rate of the surgical tool; and the tool path.

20. The method of claim **19**, comprising the one or more controllers:

comparing the at least one deviation to a threshold, wherein the threshold is at least one of: a minimum, a maximum, a range, or a standard deviation;

determining that the at least one deviation exceeds the threshold; and

responding to the at least one deviation in response to determining that the at least one deviation exceeds the threshold.

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