Project description, medical application, general open technology. Paper is somewhat general and tutorial. Not only can ILEMT hardware and software be used outside of the medical application, with different source and sensor configurations and workspaces, there is also a lack of specific and comprehensive literature on EMT calibration methods. Open source, pointer to repository.

Specific performance goals: speed, noise, workspace, accuracy

Evaluation: methods and results. Linearity and cross-coupling

It may help intuitive understanding of the problem to realize that the source and sensor are magnetically interchangeable. Our actual measurement is the coupling between the source and sensor coils (mutual inductance), and this is a symmetrical relation. If it were possible to drive the sensor coil at high current, then the same small voltage would be induced in the source coil as was previously measured in the sensor. With this view, we can model the sensor as though it were a source, and in particular, use multi-dipole configurations such as the magnetic quadrupole. [Given weak value of high-order sensor models, not clear how important it is to have this in the paper. But it is part of what we have implemented, and lack of usefulness is somewhat interesting.]

Our current calibration code only supports configurations with three source coils and three sensor coils, but generalization to other models is straightforward because the details of the coil arrangements and magnetic model

In the dipole model, each coil has a 3DOF position and a 3DOF moment, giving 6 parameters per coil. The moment is a vector representing the orientation and magnitude of the coil’s response. The field is modelled as axially symmetric, so the coil pose is only characterized in 5DOF. The extra degree of freedom out of 6 is in the moment magnitude, which is a magnetic and electronic sensitivity parameter, not kinematics.

EMT performance has often been specified and evaluated primarily by the position error [cite], with fewer attempts to consider sensor angular error. While an EMT could be used in ways where rotation error would become particularly important, the most common application is measurement a tool tip position where the tool tip and sensor may be at opposite ends of the tool. The tool length creates a moment which converts angular error and noise into tip position error. With optical trackers, angular error can often dominate the tip position error [cite ASAP]. But an EMT measures position using a polar principle. For the sensor position with respect to the source, the tangential position error is larger than the radial error, but the angular error at the sensor is a similar magnitude to the source-referred angular error. This means when the tip offset moment is well less than the source to sensor distance, the tip position error due to sensor angle error is small compared to the sensor position error alone. This is a rarely mentioned benefit of EMTs, and should be considered when comparing to other technologies.

[use moment in position error reports?] [picture of moment effect] Gets into sensitivity