

Directional, Squeezing, and Pulse Feedback for VR Robotic Surgery

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Abstract—This study presents a haptic illusion-based vibrotactile feedback system to provide directional, squeezing, and pulse haptic feedback, enhancing tactile realism in VR-based robotic surgery. Clinical tests confirm high user satisfaction and effectiveness, paving the way for broader integration in surgical training platforms.

Index Terms—Haptic illusion, Haptic feedback, Robotic surgery

I. INTRODUCTION

Virtual reality (VR)-based surgical systems offer valuable platforms for preoperative training and surgical planning, enabling immersive visualization and improved procedural rehearsal; however, the absence of direct tactile feedback remains a critical limitation. This study introduces a haptic illusion-based vibrotactile system enhancing tactile perception in virtual reality surgery by simulating tool-tissue interactions, such as directional movement cues, tissue squeezing awareness, and pulse contact warnings.

II. METHODOLOGY

Our proposed system integrates eccentric rotating mass (ERM) motors embedded within a silicone housing placed on the fingertips of the index finger and thumb, delivering precise and localized tactile feedback.

The system implements three tactile feedback modalities: (1) Directional Feedback provides six-directional phantom sensations (left, right, up, down, clockwise, counterclockwise) to create motion illusions, aiding perception of tool-tissue displacement or force direction and reducing unintended slippage. (2) Squeezing Feedback encodes tissue stiffness by adjusting vibration intensity based on finger-to-finger distance, offering

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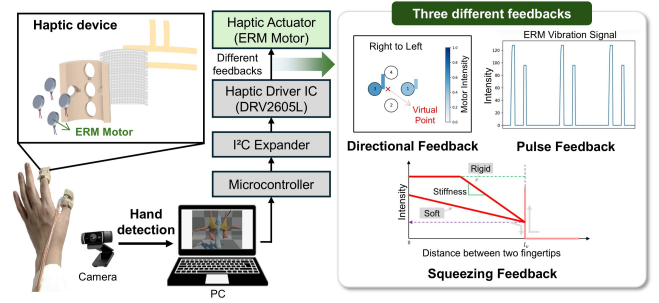


Fig. 1. Block Diagram of the system

intuitive cues that improve grip control and lower excessive pressure. (3) Pulse Feedback simulates arterial pulsation via a strong-long/weak-short vibration pattern, helping prevent excessive force that could damage arteries.

Our tactile system is integrated into a VR environment, with pulse feedback mapped to realistic surgical scenarios, and directional and squeezing feedback incorporated into basic simulations.

III. RESULT

A user study with six clinicians showed high feedback recognition accuracy (82–100%) and strong Likert scale (1–5) satisfaction: squeezing feedback was rated highly necessary (4.3), pulse feedback highest in realism (4.3) and intuitiveness (4.4). Overall, the system scored 3.7 for comfort and 3.8 for willingness to adopt in training, though some users reported fatigue, indicating the need to enhance device wearability and comfort. Future work will focus on deeper integration with complex VR surgical scenarios to boost training realism and applicability.