



are doing a learning curve monitoring, and if you're doing it one day in a real, clinical training setting, like a residency programme that's several years long, it can be nice to track the metric and see how it progresses along the learning curve. For that, a good granularity at the resolution of the metric is better. If it's a number and it's more of a regression, you can see how the number improves and it's not just a step up from today you're beginner, tomorrow you're intermediate, and one day you're advanced.

Daniel told us an interesting story about an experience he'd had doing the experiment:

*"When I got there ready to do the experiment, I had a plan of how the experiment should work and we sit down to try to do a microsurgery in the Research Kit, for our first time, suddenly we realised the problem and it wasn't going to work. That problem was on the topic of changing the magnification and changing the motion of the camera and the position in the visual field. When we tried to do it the first time, I realised that I'm going to need some control over the camera motion and the camera field. Very quickly, we invented a solution for this. We had a start-up next door that had a foot pedal plate that mimics the da Vinci's foot pedal plate. We were able to borrow that from them, connect it with USB, add a few lines of code to integrate it into the ROS package, and then we had a new user interface foot pedal that allowed me to control the camera for specifically this microsurgery experiment. I just submitted to the CRAS meeting that will be in September."*