



Action officer

Kristine Kirkebø Giske, krgiske@mil.no
+47, +4767863452
/PROCUREMENT/LAND JOINT M/CONSEC 1 LAN

Our date

2026-06-12

Our reference

2026/023067-005/DEFNON/ 99

Previous date

Previous reference

To

Whom it may concern

...

Copy to

P7922 Helhetlig luftevakuering - Request for information - Medical Air Evacuation Capability for A320neo Platform

Dear Sir or Madam,

The Norwegian Defence Materiel Agency (NDMA) issues this Request for Information (RFI) to organisations with relevant experience and capabilities within aircraft design, modification, certification, and integration, including organisations approved under EASA Part 21 Subpart J (DOA).

This RFI is published openly in order to reach the broader market and ensure that all relevant actors are given the opportunity to provide input.

The purpose of this RFI is to obtain general information on how a medical air evacuation capability for the Airbus A320neo platform may be realised, and to support NDMA in developing an overall understanding of how the market approaches and may be positioned in relation to such a delivery.

NDMA recognises that complete solutions may not be available today and hence encourage recipients to include information on your existing capabilities, and how they may be realised, to deliver such a capability. In this context, NDMA is particularly interested in understanding how your organisation, based on its technical and organisational capabilities, can demonstrate that a solution could be developed, documented, and brought to the necessary level of approval within the applicable certification framework, without requiring a level of development or maturity beyond what your organisation normally handles.

Respondents are invited to describe and substantiate how this could be achieved based on their current competencies, approvals, experience, and organisational setup.

NDMA invites your organisation to provide a response reflecting its capabilities and considered approach. Where relevant, responses should be supported by examples or practical experience.

Mailing address

Postboks 800 Postmottak
2617 Lillehammer
Norge

Visiting address

Grev Wedels plass 1
0151 OSLO
Norge

Telephone no

/

Military phone no

0510 3003

E-mail / Internet

postmottak@fma.no
www.fma.no

VAT Reg. No

NO 916 075 855

No of encl.

Background – System description

Strategic Air Evacuation (SAE) is intended as a modular medical capability to be installed in a civilian aircraft (A320neo), operated by Scandinavian Airlines (SAS).

The SAE consists of medical equipment and configurations that enable medical crews to provide treatment during transport between medical facilities and other locations where evacuation is required.

The system is expected to support operations of extended duration (up to approximately 24 hours), across varying operational environments where flexibility, robustness, and adaptability are required. Note that 24 hours is not set for continuous flight time.

The system is intended to support:

- Four Intensive Care Stations (ICS) with maximum possible number of Litter Stations (LS)
- Four Intensive Care Stations with a balanced set number of Litter Stations and Seated Stations (SS)
- Two Intensive Care Stations with a balance set of Litter Stations and Seated Stations

Overall system characteristics

The capability will include a modular and certifiable system that:

- can be installed in a commercial aircraft.
- can be removed and return the aircraft back to perform normal commercial air transport operations, without permanent modification to the aircraft, similar to pre-installation.

The capability will involve:

- defined design responsibility (e.g. DOA / STC holder role)
- defined production responsibility (e.g. POA or equivalent)
- overall system responsibility, including integration and coordination

The capability will be developed, integrated, and approved within the applicable EASA Part 21 framework and requires coordination with the aircraft operator, authorities, and relevant organisations.

1 Positioning in relation to the capability

a) To what extent does your organisation consider itself positioned to contribute to, or assume responsibility for such a delivery?

→ Please support your response with relevant experience, approvals, and organisational structure.

b) How does your organisation relate to the system characteristics described above?

→ Please describe how your organisation approaches and develop solutions for:

- modular installation
 - removability and returning the aircraft back to standard configuration without permanent modification
-

- system-level integration

c) How is responsibility typically structured for:

- design (DOA / STC holder)
- production (POA)
- system integration

→ Please describe how this is organised and maintained in practice.

d) How would partners or subcontractors typically be involved?

→ Please describe roles, responsibilities, and interfaces, including how overall responsibility is retained.

2 Airworthiness and certification

a) How would the certification programme be managed to ensure compliance towards relevant certification specification, project scope (major change/STC) and ensure mission capability/customer/user need.

b) How are subsystems and equipment (e.g. oxygen systems, medical equipment, removable elements) typically managed in certification project?

c) How are provisions and documentation for removable "carry-on" or loose items elements typically addressed from a certification perspective, to ensure airworthiness, compliance and simultaneously be flexibility for operators, passengers/medical crew to carry medical equipment onboard for patient treatment?

→ Please describe your approach and relevant experience.

3 Installation and integration

a) How would installation into an aircraft such as A320neo typically be approached?

b) How would removability and restoration of the aircraft be ensured?

→ Please describe how:

- the system is installed and removed
 - the aircraft is returned to its original configuration for normal commercial air transport operation, similar to pre-installation.
 - To what extent is or could the system be certified with provisions that ensure airworthiness and flexibility for operators, passengers/medical crew to carry medical equipment for patient treatment, and handle this as loose items/Portable Electronic Devices (PEDs)?
-

4 Functional aspects

4.1 Patient configuration

a) How would different patient configurations (ICS / LS / SS) be supported?

→ Please describe configuration concepts and operational flexibility.

4.2 Intensive Care Stations (ICS)

a) How would intensive care functionality typically be integrated, in order to provide the medical crew with the ability to monitor and assist the patient in an ergonomic manner?

→ Please describe:

- electromedical equipment
- monitoring and life support
- power and oxygen supply

b) How would patient positioning and crew access be addressed in practice?

c) How would boarding and handling of patients typically be performed?

4.3 Litter and seating solutions

a) How would litter stations and seating arrangements be designed?

→ Please describe relevant standards and approaches.

5 Oxygen systems

a) How would oxygen supply to patients typically be designed and dimensioned?

→ Please describe:

- capacity per patient type
- total system capacity for handling of simultaneous demands

b) How would distribution, redundancy, and system robustness be ensured?

6 Safety and critical conditions

a) How are safety-related aspects typically addressed, including:

- emergency oxygen supply
- mitigation of oxygen leakage
- operation under emergency landing or degraded conditions

→ Please describe safety approach and mitigation measures.

7 Supporting systems

- a) How would supporting systems (e.g. power supply, lighting, storage) be addressed?
- b) How would critical support functions (e.g. blood storage and temperature control) be handled?

8 Capability gap and development

- a) How would differences between your current capabilities and the described system be addressed?

→ Please describe:

- existing capability
- expected development needs
- expected development gaps and estimated certification timelines
- how such development is typically planned and realized

Practical information

NDMA values responses that are clear, well considered, and based on practical experience.

Participation in this RFI is entirely voluntary. NDMA recognises that preparing a response requires time and resources, and appreciates the effort involved. Please note that no financial compensation will be provided for participation.

Responses are requested by the **7th of August at 10 am CET**, and are submitted to commercial officer Kristine K. Giske in Merzell, in a MS Office-compatible format.

NDMA may, where considered appropriate, contact respondents to clarify or further explore elements of the submitted information.

Information provided may be shared with the aircraft operator, Scandinavian Airlines (SAS), for the purpose of establishing a common understanding of operational and technical considerations related to the capability.

NDMA will treat all submitted information with due care. Information that constitutes business secrets or commercially sensitive material will, as a general rule, be exempt from disclosure under the Norwegian Freedom of Information Act (offentleglova).

At the same time, NDMA is required to assess any request for access on a case-by-case basis. Contributors are therefore kindly invited to identify any information considered commercially sensitive and, where appropriate, indicate the basis for such classification. This will assist NDMA in handling such information with the necessary care.

NDMA appreciates your consideration and the time taken to review this request.

Sincerely

A handwritten signature in blue ink, appearing to read 'Cathrine Flatum Thrane', with a long horizontal flourish extending to the right.

Cathrine Flatum Thrane (ef)
Head of Section
Contract Department

